**Institute of Statistical, Social & Economic Research**

**(ISSER)**



**University of Ghana, Legon**

**Poverty and Human Development Survey**

**HOUSEHOLD INSTRUMENT**

**(2016)**

**REGION Name: |\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_| COMMUNITY NAME: |\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_|**

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**District Name: |\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_| HH NO:**

**Interviewer ID: Supervisor ID:**

**START TIME: HOUR MIN MIN**

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| D | D | M | M | **2** | **0** | **1** | **6** |

HOUSEHOLD INFORMATION **DATE:**

**1. Locality** **Name**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **2. Head of Household in 2012 (name)**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**1a. Locality Code**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |

**3.** **Household No or Serial**:

**6. Location of household**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**7. Interviewer ID**: **8.Supervisor ID:**

**9. Main Language Spoken At Home:**

Asante 11 Guan 41

Fanti 12 Buli 51

Akuapem 13 Mamprusi 52

Sefwi 14 Frafra/Gruni 53

Brong 15 Kassen` 54

Nzema 16 Dagbani 55

Ga 21 Wali/Dagari 56

Dangme 22 Sissala 57

Ewe 31 Other (Speify) 96

**10. Type of Housing**

1. Separate House (Bungallow)

2. Semi-Detached House

3. Flat (Apartment)

4. Rooms (Compound)

5. Room(s)

6. Room(s) Several Huts/Buildings (Same Compound)

7. Room(s) SeveralHuts/Buildings (Different Compound)

8. Tents/Improvised Home

9. Other (Specify)

|  |  |
| --- | --- |
|  |  |

**11. How many rooms are in this dwelling (*Dwelling here refers to Housing Unit*)?**

**12. Does another household share this dwelling?**

|  |
| --- |
|  |

1. Yes

2. No

# SECTION 1 – HOUSEHOLD BACKGROUND

*(To be asked of HH head or most knowledgeable person on each subject)*

### Section 1A1: Household Composition Confirmation

[Read out names of individuals from pre-filled prior roster sheet. Indicate whether person still lives in household. If person is not in the household complete Q4].

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Q1 | Q2 | Q3 | Q3b | Q3c | Q4 | Q5 | | Q6 | Q11 |
| Roster ID 2012 | Is person still residing in hhld?  Yes =1  No =2 >>4 | Age now? | Has (name) ever been married?  Yes =1  No =2 | Has name ever fathered/mothered a child? >>11  Yes =1  No =2 | Why is NAME no longer in the household?  1....Moved for work  2....Moved for school 3....Moved to live w/ relatives  4....Death of caregiver(s) residing in this hhld  5....Death of person living outside this hhld  6....Person died >>(move to next person)  7....Marriage  8....Pregnancy  9....Set up new household  10...To follow other family members  11...Recover from illness  12...Break-up of household  13...Birth  98...DK | When did NAME leave the hhld?  [Month (01-12) and Year(all four digits)] | | Where did NAME move to?  1.....Live with other family members in SAME community  2....Live with NON-family members in SAME community  3....To live with family members outside community  4....To live with NON family members OUTSIDE community  98.....DK  >>next person | **Current Cell Phone Number** |
| Year  |\_||\_||\_||\_| | Month  |\_||\_| |
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Section 1A2: New Household Members[*List new and ‘not listed’ household members]*

Q0 Has any new person joined the household apart from those I have mentioned? Yes------[1] No-------[2] >> (Future contact information)

Q0a Is this person a newborn baby? Yes-----[1] >>Q12 No-----[2]

Q0b Has the ONE been living in the household for more than six (6) months? Yes------[1] No-------[2] >> (Future contact information)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Q12 | Q13 | Q14 | Q15 | Q16 | Q17 | Q18 |
| What is person’s first name? | What is person’s last name? | New Roster ID  (continue from the last digit of the old IDs taking care to continue sequence throughout the questionnaire) | Why did NAME join this hhld?  1....Moved for work  2....Moved for school  3....Moved to live w/ relatives  4...Death of caregiver(s) residing in former hhld  5...Death of person living in this hhld  6....Not listed in prior survey  7....Marriage  8....Pregnancy/delivery  9....Set up new household  10..Followed other family members  11...Recover from illness  12...Break-up of former household  13.....New baby  98....DK | How long has NAME been part of this hhld?  1...<6 month  2....6-12 months  3... more than12 months  98....DK | Where did NAME move from?  1.....Live with other family members in SAME community  2....Live with NON-family members in SAME community  3....To live with family members outside community  4....To live with NON family members OUTSIDE community  98.....DK | **Current Cell Phone Number** |
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### Future Contact Information

Enumerator: please remind the household that they may be interviewed again and thus having a way to contact them in the future is critical to the success of the survey. We are going to ask them for two people who can be contacted in the future should the family move from the village.

0: If you left this place, who would be the most likely people to know where you are?

|  |  |  |
| --- | --- | --- |
|  | **Contact 1** | **Contact 2** |

|  |  |  |
| --- | --- | --- |
| **. Name of contact persons** |  |  |

|  |  |  |
| --- | --- | --- |
| **. Relationship to you** |  |  |

|  |  |  |
| --- | --- | --- |
| **. Where do these people currently live?**  1. Name of community  2. Name of region | 1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |  |
| --- | --- | --- |
| **. Phone numbers of these persons** |  |  |

|  |  |  |
| --- | --- | --- |
| **. How best would we be able to contact these people?**  **(Pls*. feel free to give as many options as necessary*)**  **e.g. Contact address, landmarks, street numbers, nicknames etc** |  |  |

**0. Are you happy with your life? 1. Yes 2. No**

Section 1B: Background Information **- *(To be asked about all household members)***

| **Member ID** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **ID of Person Interviewed** |  |  |  |  |  |  |  |  |  |  |
| **1. Sex**  1. Male  2. Female | 1. Male  2. Female | 1. Male  2. Female | 1. Male  2. Female | 1. Male  2. Female | 1. Male  2. Female | 1. Male  2. Female | 1. Male  2. Female | 1. Male  2. Female | 1. Male  2. Female | 1. Male  2. Female |
| **2.** **What is [Name’s] relationship with the Head of the Household?**  1. Head - HH  2. Spouse - SH  3. Child - CH  4. Grandchild - GH  5. Parent/Parent-in-law - PI  6. Son/Daughter-in-law - CI  7. Other relative - OR  8. Adopted/Foster/Stepchild – AD  9. House help - HS  10. Non-relative – NR | 1. HH  2. SH  3. CH  4. GH  5. PI  6. CI  7. OR  8. AD  9. HS  10. NR | 1. HH  2. SH  3. CH  4. GH  5. PI  6. CI  7. OR  8. AD  9. HS  10. NR | 1. HH  2. SH  3. CH  4. GH  5. PI  6. CI  7. OR  8. AD  9. HS  10. NR | 1. HH  2. SH  3. CH  4. GH  5. PI  6. CI  7. OR  8. AD  9. HS  10. NR | 1. HH  2. SH  3. CH  4. GH  5. PI  6. CI  7. OR  8. AD  9. HS  10. NR | 1. HH  2. SH  3. CH  4. GH  5. PI  6. CI  7. OR  8. AD  9. HS  10. NR | 1. HH  2. SH  3. CH  4. GH  5. PI  6. CI  7. OR  8. AD  9. HS  10. NR | 1. HH  2. SH  3. CH  4. GH  5. PI  6. CI  7. OR  8. AD  9. HS  10. NR | 1. HH  2. SH  3. CH  4. GH  5. PI  6. CI  7. OR  8. AD  9. HS  10. NR | 1. HH  2. SH  3. CH  4. GH  5. PI  6. CI  7. OR  8. AD  9. HS  10. NR |
| **3. What is [Name’s] date of birth?**  1. dd mm yyyy  999=DK | DD  MM  YYYY | DD  MM  YYYY | DD  MM  YYYY | DD  MM  YYYY | DD  MM  YYYY | DD  MM  YYYY | DD  MM  YYYY | DD  MM  YYYY | DD  MM  YYYY | DD  MM  YYYY |
| **4. How old is (Name)?**  1. yy. mm if <5 ; otherwise, just years. | YY  MM | YY  MM | YY  MM | YY  MM | YY  MM | YY  MM | YY  MM | YY  MM | YY  MM | YY  MM |
| **5. Is (Name) <12 years**  1. Yes >>17  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No |
| **6. What is [Name’s] marital status?**  1. Married - MA  2. Consensual union - CU  3.Separated (>> 9) - SE  4. Divorced (>> 9) - DI  5. Widowed (>> 9) - WI  6. Never married (>> 17) - NM  7.Betrothed – BE | 1. MA  2. CU  3. SE  4. DI  5. WI  6. NM  7. BE | 1. MA  2. CU  3. SE  4. DI  5. WI  6. NM  7. BE | 1. MA  2. CU  3. SE  4. DI  5. WI  6. NM  7. BE | 1. MA  2. CU  3. SE  4. DI  5. WI  6. NM  7. BE | 1. MA  2. CU  3. SE  4. DI  5. WI  6. NM  7. BE | 1. MA  2. CU  3. SE  4. DI  5. WI  6. NM  7. BE | 1. MA  2. CU  3. SE  4. DI  5. WI  6. NM  7. BE | 1. MA  2. CU  3. SE  4. DI  5. WI  6. NM  7. BE | 1. MA  2. CU  3. SE  4. DI  5. WI  6. NM  7. BE | 1. MA  2. CU  3. SE  4. DI  5. WI  6. NM  7. BE |
| **7. Does spouse live in the household?**  1. Yes  2. No (>>9) | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No |
| **8. Spouse’s ID** (If more than one spouse, get ID of the first spouse)  1. ID | 1.\_\_\_\_\_\_\_\_\_\_  ID | 1.\_\_\_\_\_\_\_\_\_\_  ID | 1.\_\_\_\_\_\_\_\_\_\_  ID | 1.\_\_\_\_\_\_\_\_\_\_  ID | 1.\_\_\_\_\_\_\_\_\_\_  ID | 1.\_\_\_\_\_\_\_\_\_\_  ID | 1.\_\_\_\_\_\_\_\_\_\_  ID | 1.\_\_\_\_\_\_\_\_\_\_  ID | 1.\_\_\_\_\_\_\_\_\_\_  ID | 1.\_\_\_\_\_\_\_\_\_\_  ID |
| **9. At what age did (Name) get married or start living with a partner? (first marriage)**  1. Age 2.DK | Age -------- | Age -------- | Age -------- | Age -------- | Age -------- | Age -------- | Age -------- | Age -------- | Age -------- | Age -------- |
| **11. In what year did (Name) get married or start living with a partner? (first marriage)** |  |  |  |  |  |  |  |  |  |  |
| **17. Does [Name’s] father live in this household?**  1. Yes ,ID of father >>20  2. No, deceased  3. No, other household. | 1. \_\_\_\_\_\_\_\_\_  ID  2.  3. | 1. \_\_\_\_\_\_\_\_\_  ID  2.  3. | 1. \_\_\_\_\_\_\_\_\_  ID  2.  3. | 1. \_\_\_\_\_\_\_\_\_  ID  2.  3. | 1. \_\_\_\_\_\_\_\_\_  ID  2.  3. | 1. \_\_\_\_\_\_\_\_\_  ID  2.  3. | 1. \_\_\_\_\_\_\_\_\_  ID  2.  3. | 1. \_\_\_\_\_\_\_\_\_  ID  2.  3. | 1. \_\_\_\_\_\_\_\_\_  ID  2.  3. | 1. \_\_\_\_\_\_\_\_\_  ID  2.  3. |
| **18. What is/was [Name’s] father’s highest level of education completed?**  1. None - NO  2. Primary - PO  3. Middle/JSS - MO  4. Voc/Comm - VC  5. 'O' level -O  6. SSS - SS  7. 'A' level - AO  8. Training college - TC  9. Tech/prof - TP  10. Tertiary-TE  11. Koranic - KO  12. Don't know - DK  13.Other (specify) | 1.NO  2.PO  3.MO  4.VC  5.OO  6.SS  7.AO  8.TC  9.TP  10.TE  11.KO  12.DK  13  \_\_\_\_\_\_\_\_\_\_ | 1.NO  2.PO  3.MO  4.VC  5.OO  6.SS  7.AO  8.TC  9.TP  10.TE  11.KO  12.DK  13  \_\_\_\_\_\_\_\_\_\_ | 1.NO  2.PO  3.MO  4.VC  5.OO  6.SS  7.AO  8.TC  9.TP  10.TE  11.KO  12.DK  13  \_\_\_\_\_\_\_\_\_\_ | 1.NO  2.PO  3.MO  4.VC  5.OO  6.SS  7.AO  8.TC  9.TP  10.TE  11.KO  12.DK  13  \_\_\_\_\_\_\_\_\_\_ | 1.NO  2.PO  3.MO  4.VC  5.OO  6.SS  7.AO  8.TC  9.TP  10.TE  11.KO  12.DK  13  \_\_\_\_\_\_\_\_\_\_ | 1.NO  2.PO  3.MO  4.VC  5.OO  6.SS  7.AO  8.TC  9.TP  10.TE  11.KO  12.DK  13  \_\_\_\_\_\_\_\_\_\_ | 1.NO  2.PO  3.MO  4.VC  5.OO  6.SS  7.AO  8.TC  9.TP  10.TE  11.KO  12.DK  13  \_\_\_\_\_\_\_\_\_\_ | 1.NO  2.PO  3.MO  4.VC  5.OO  6.SS  7.AO  8.TC  9.TP  10.TE  11.KO  12.DK  13  \_\_\_\_\_\_\_\_\_\_ | 1.NO  2.PO  3.MO  4.VC  5.OO  6.SS  7.AO  8.TC  9.TP  10.TE  11.KO  12.DK  13  \_\_\_\_\_\_\_\_\_\_ | 1.NO  2.PO  3.MO  4.VC  5.OO  6.SS  7.AO  8.TC  9.TP  10.TE  11.KO  12.DK  13  \_\_\_\_\_\_\_\_\_\_ |
| **20. Does [Name’s] mother live in this household?**  1. Yes, ID of mother >>27  2. No, deceased  3. No, other household | 1.\_\_\_\_\_\_\_\_  ID  2.  3. | 1.\_\_\_\_\_\_\_\_  ID  2.  3. | 1.\_\_\_\_\_\_\_\_  ID  2.  3. | 1.\_\_\_\_\_\_\_\_  ID  2.  3. | 1.\_\_\_\_\_\_\_\_  ID  2.  3. | 1.\_\_\_\_\_\_\_\_  ID  2.  3. | 1.\_\_\_\_\_\_\_\_  ID  2.  3. | 1.\_\_\_\_\_\_\_\_  ID  2.  3. | 1.\_\_\_\_\_\_\_\_  ID  2.  3. | 1.\_\_\_\_\_\_\_\_  ID  2.  3. |
| **21. What is/was [Name’s] mother’s highest level of education completed?**  1. None - NO  2. Primary - PO  3. Middle/JSS - MO  4. Voc/Comm - VC  5. 'O' level - OO  6. SSS - SS  7. 'A' level - AO  8. Training college - TC  9. Tech/prof - TP  10. Tertiary - TE  11. Koranic - KO  12. Don't know - DK | 1.NO  2.PO  3.MO  4.VC  5.OO  6.SS  7.AO  8.TC  9.TP  10.TE  11.KO  12.DK | 1.NO  2.PO  3.MO  4.VC  5.OO  6.SS  7.AO  8.TC  9.TP  10.TE  11.KO  12.DK | 1.NO  2.PO  3.MO  4.VC  5.OO  6.SS  7.AO  8.TC  9.TP  10.TE  11.KO  12.DK | 1.NO  2.PO  3.MO  4.VC  5.OO  6.SS  7.AO  8.TC  9.TP  10.TE  11.KO  12.DK | 1.NO  2.PO  3.MO  4.VC  5.OO  6.SS  7.AO  8.TC  9.TP  10.TE  11.KO  12.DK | 1.NO  2.PO  3.MO  4.VC  5.OO  6.SS  7.AO  8.TC  9.TP  10.TE  11.KO  12.DK | 1.NO  2.PO  3.MO  4.VC  5.OO  6.SS  7.AO  8.TC  9.TP  10.TE  11.KO  12.DK | 1.NO  2.PO  3.MO  4.VC  5.OO  6.SS  7.AO  8.TC  9.TP  10.TE  11.KO  12.DK | 1.NO  2.PO  3.MO  4.VC  5.OO  6.SS  7.AO  8.TC  9.TP  10.TE  11.KO  12.DK | 1.NO  2.PO  3.MO  4.VC  5.OO  6.SS  7.AO  8.TC  9.TP  10.TE  11.KO  12.DK |
| **27. For how many months has (Name) been away from this household in the last 12 months?**  1. Number of months,  If less than 6 months (>>Next Person) | 1.\_\_\_\_\_\_\_\_ | 1.\_\_\_\_\_\_\_\_ | 1.\_\_\_\_\_\_\_\_ | 1.\_\_\_\_\_\_\_\_ | 1.\_\_\_\_\_\_\_\_ | 1.\_\_\_\_\_\_\_\_ | 1.\_\_\_\_\_\_\_\_ | 1.\_\_\_\_\_\_\_\_ | 1.\_\_\_\_\_\_\_\_ | 1.\_\_\_\_\_\_\_\_ |
| **28.** **While absent, is (Name) a member of another household?** Including a single person household  1. Yes 2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No |
| **29. For what reason did (Name) move away?**  **1. Job transfer**  **2. Seeking employment 3.Spouse’s employment**  **4. Marriage**  **5. Other family reason**  **6. Education**  **7. Political/religious**  **8. Other (specify)** | 1.  2  3.  4.  5.  6.  7.  8. | 1.  2  3.  4.  5.  6.  7.  8. | 1.  2  3.  4.  5.  6.  7.  8. | 1.  2  3.  4.  5.  6.  7.  8. | 1.  2  3.  4.  5.  6.  7.  8. | 1.  2  3.  4.  5.  6.  7.  8. | 1.  2  3.  4.  5.  6.  7.  8. | 1.  2  3.  4.  5.  6.  7.  8. | 1.  2  3.  4.  5.  6.  7.  8. | 1.  2  3.  4.  5.  6.  7.  8. |

# SECTION 2 – EMPLOYMENT

*(To be asked of all Household Members Age 5 years or Older who were employed in the last 7 days)*

### Part A: Employment

i. **MAIN PAID (CASH AND IN-KIND) OCCUPATION LAST 7 DAYS**

***COMPLETE ENTIRE SHEET FOR ALL HOUSEHOLD MEMBERS AGE 5 OR OLDER WHO WERE EMPLOYED (NOT SELF-EMPLOYED) IN THE LAST 7 DAYS***

|  |
| --- |
| **0. Point of Verification:** In the last 7 days, has anyone in this household done work for which s/he was NOT self employed? (i.e. the individual was someone else’s employee)   1. Yes 2. No >> iii |

| **Member ID** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **ID of Person Interviewed** |  |  |  |  |  |  |  |  |  |  |
| **1. How many jobs has (Name) had, off the family farm or household enterprise, for which s/he was paid in the last 7 days?**  1. number , If 0>>next person |  |  |  |  |  |  |  |  |  |  |
| **2. Describe the main tasks and duties of the work that (Name) spent most time on during the last 7 days?** |  |  |  |  |  |  |  |  |  |  |
| **3. ISCO code for above**  (See Codebook and write 3 digits) |  |  |  |  |  |  |  |  |  |  |
| **4. Describe the kind of trade, services, or industry that this work is connected to?** |  |  |  |  |  |  |  |  |  |  |
| **5. ISIC code for above**  (See Codebook and write 4 digits) |  |  |  |  |  |  |  |  |  |  |
| **6. What was the location of the primary job?**  1. In this community  2. In a neighboring village  3. The district capital  4. Regional capital  5. Another Town (not district or regional capital)  6. in another country |  |  |  |  |  |  |  |  |  |  |
| **7. During the last year, how many weeks has (Name) done this job (out of 52)? How many days per week and hours per day did (Name) typically work?**  1. Weeks  2.Number of days in a typical  week  3.Number of hours in a typical day | 1. \_\_\_\_\_wk  2. \_\_\_\_ d/wk  3.\_\_\_\_\_hrs/d | 1. \_\_\_\_\_wk  2. \_\_\_\_ d/wk  3.\_\_\_\_\_hrs/d | 1. \_\_\_\_\_wk  2. \_\_\_\_ d/wk  3.\_\_\_\_\_hrs/d | 1. \_\_\_\_\_wk  2. \_\_\_\_ d/wk  3.\_\_\_\_\_hrs/d | 1. \_\_\_\_\_wk  2. \_\_\_\_ d/wk  3.\_\_\_\_\_hrs/d | 1. \_\_\_\_\_wk  2. \_\_\_\_ d/wk  3.\_\_\_\_\_hrs/d | 1. \_\_\_\_\_wk  2. \_\_\_\_ d/wk  3.\_\_\_\_\_hrs/d | 1. \_\_\_\_\_wk  2. \_\_\_\_ d/wk  3.\_\_\_\_\_hrs/d | 1. \_\_\_\_\_wk  2. \_\_\_\_ d/wk  3.\_\_\_\_\_hrs/d | 1. \_\_\_\_\_wk  2. \_\_\_d/wk  3.\_\_\_\_\_hrs/d |
| **8. During the last 7 days, how long did (Name) actually do this job?**  1. Days last week  2. Hours per day | 1. \_\_\_\_ d/wk  2..\_\_\_\_\_hrs/d | 1. \_\_\_\_ d/wk  2..\_\_\_\_\_hrs/d | 1. \_\_\_\_ d/wk  2..\_\_\_\_\_hrs/d | 1. \_\_\_\_ d/wk  2..\_\_\_\_\_hrs/d | 1. \_\_\_\_ d/wk  2..\_\_\_\_\_hrs/d | 1. \_\_\_\_ d/wk  2..\_\_\_\_\_hrs/d | 1. \_\_\_\_ d/wk  2..\_\_\_\_\_hrs/d | 1. \_\_\_\_ d/wk  2..\_\_\_\_\_hrs/d | 1. \_\_\_\_ d/wk  2..\_\_\_\_\_hrs/d | 1. \_\_\_\_ d/wk  2..\_\_\_\_\_hrs/d |
| **9. Has (Name) received or will (Name) receive money for this work?**  1. Yes  2. No >> 21 | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No |
| **10. What is the amount (including any bonuses, commissions, allowances or tips) received or owed for work done (including in-kind payments)?**  (Ghana cedis) | c | c | c | c | c | c | c | c | c | c |
| **11. Over what time period is this amount paid or owed?**  1. Daily  2. Weekly  3. Monthly  4. Quarterly  5. Other (specify) | 1.  2.  3.  4.  5.  ----------------- | 1.  2.  3.  4.  5.  ----------------- | 1.  2.  3.  4.  5.  ----------------- | 1.  2.  3.  4.  5.  ----------------- | 1.  2.  3.  4.  5.  ----------------- | 1.  2.  3.  4.  5.  ----------------- | 1.  2.  3.  4.  5.  ----------------- | 1.  2.  3.  4.  5.  ----------------- | 1.  2.  3.  4.  5.  ----------------- | 1.  2.  3.  4.  5.  ----------------- |
| **21. Is (Name) entitled to free or subsidized medical care in this job?**  1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No |

iii. **PAID EMPLOYMENT IN THE LAST 12 MONTHS AND NOT IN THE LAST 7 DAYS**

***ANSWER FOR ALL HOUSEHOLD MEMBERS 7 YEARS AND OLDER, AND WHO ARE CURRENTLY NOT PAID EMPLOYEES OUTSIDE THE HOUSEHOLD***

| **Member ID** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **ID of Person Interviewed** |  |  |  |  |  |  |  |  |  |  |
| **73. Did [name] have paid work in the last 12 months (but not the last 7 days)?**  **(should not have filled out Section 2Ai)**    **1. Yes**  **2. No >> Section 3** |  |  |  |  |  |  |  |  |  |  |
| **75. ISCO code for main tasks and duties in the job**  **(See Codebook and fill in first 3 digits)** | |\_\_|\_\_|\_\_| | |\_\_|\_\_|\_\_| | |\_\_|\_\_|\_\_| | |\_\_|\_\_|\_\_| | |\_\_|\_\_|\_\_| | |\_\_|\_\_|\_\_| | |\_\_|\_\_|\_\_| | |\_\_|\_\_|\_\_| | |\_\_|\_\_|\_\_| | |\_\_|\_\_|\_\_| |
| **76. ISIC code for trade or industry work is connected with**  **(See Codebook and fill in last 4 digits)** | |\_\_|\_\_|\_\_|\_\_| | |\_\_|\_\_|\_\_|\_\_| | |\_\_|\_\_|\_\_|\_\_| | |\_\_|\_\_|\_\_|\_\_| | |\_\_|\_\_|\_\_|\_\_| | |\_\_|\_\_|\_\_|\_\_| | |\_\_|\_\_|\_\_|\_\_| | |\_\_|\_\_|\_\_|\_\_| | |\_\_|\_\_|\_\_|\_\_| | |\_\_|\_\_|\_\_|\_\_| |
| **77. During the last year, how many weeks has (Name) done this job (out of 52)? How many days per week and hours per day did (Name) typically work?**  1. Weeks  2.Number of days in a typical  week  3.Number of hours in a typical day | 1. \_\_\_\_\_wk  2. \_\_\_\_ d/wk  3.\_\_\_\_\_hrs/d | 1. \_\_\_\_\_wk  2. \_\_\_\_ d/wk  3.\_\_\_\_\_hrs/d | 1. \_\_\_\_\_wk  2. \_\_\_\_ d/wk  3.\_\_\_\_\_hrs/d | 1. \_\_\_\_\_wk  2. \_\_\_\_ d/wk  3.\_\_\_\_\_hrs/d | 1. \_\_\_\_\_wk  2. \_\_\_\_ d/wk  3.\_\_\_\_\_hrs/d | 1. \_\_\_\_\_wk  2. \_\_\_\_ d/wk  3.\_\_\_\_\_hrs/d | 1. \_\_\_\_\_wk  2. \_\_\_\_ d/wk  3.\_\_\_\_\_hrs/d | 1. \_\_\_\_\_wk  2. \_\_\_\_ d/wk  3.\_\_\_\_\_hrs/d | 1. \_\_\_\_\_wk  2. \_\_\_\_ d/wk  3.\_\_\_\_\_hrs/d | 1. \_\_\_\_\_wk  2. \_\_\_\_ d/wk  3.\_\_\_\_\_hrs/d |
| **78a. What is the amount (including any bonuses, commissions, allowances or tips including in-kind payments) received for work done?**  **(cedis)** | c | c | c | c | c | c | c | c | c | c |
| **78b. What is the time period within which the payment is received?**  **1-daily**  **2-weekly**  **3-monthly**  **4-yearly** | Period |\_| | Period |\_| | Period |\_| | Period |\_| | Period |\_| | Period |\_| | Period |\_| | Period |\_| | Period |\_| | Period |\_| |

# SECTION 3 - EDUCATION

**i**. **GENERAL EDUCATION –ANSWER FOR ALL HOUSEHOLD MEMBERS 3 YEARS AND OLDER**

**GRADE LEVEL CODES: 0… NONE; 01…PRE-SCHOOL; 11…P1; 12…P2; 13…P3; 14…P4; 15…P5; 16…P6; 17…JSS1; 18…JSS2; 19…JSS3; 20…M1; 21…M2; 22…M3; 23…M4; 24…SSS1; 25…SSS2; 26…SSS3; 62.....SSS4/SHS4 27…S1; 28…S2; 29…S3; 30…S4; 31…S5; 32…OTHER (SPECIFY)**

| **Member ID** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1. ID of Person Interviewed** |  |  |  |  |  |  |  |  |  |  |
| **2. Has (Name) ever attended school?**  1. Yes,  2. No >>Next Person | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No |
| **3. What was the highest grade successfully completed?**  **(See GRADE LEVEL CODES above)** |  |  |  |  |  |  |  |  |  |  |
| **5 Did (Name) attend school / college at any time during the last 12 months?**  1. Yes  2. No >> Next person | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No |
| **6. Is (Name) still in school?**  1. Yes  2. No>>13 | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No |
| **7. Is the school (Name) attending Public or Private?**  1. Public Religious  2. Public Non-religious  3. Private Religious  4. Private Non-religious | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. |
| **8. What is the current grade?**  See *Grade Level Codes* Above |  |  |  |  |  |  |  |  |  |  |
| **9. How much travelling time does (Name) spend going to and from school daily?**  1. Hours  2. Minutes  (IF IN A BOARDING SCHOOL  CODE: HRS … 00, MINS … 00) >> 13 | h  m | h  m | h  m | h  m | h  m | h  m | h  m | h  m | h  m | h  m |
| **10. How many hours of class did (Name) attend last week?**  **(exclude extra classes)**  1. Hours  2. Minutes  (vacation code 99)  3.DK (Don’t know) | h  m  3 | h  m  3 | h  m  3 | h  m  3 | h  m  3. | h  m  3 | h  m  3 | h  m  3 | h  m  3 | h  m  3 |
| **11. How many hours of class did (Name) miss last week?**  1. Hours  2. Minutes  (If on vacation, code 99 for HOURS)  3.DK (Don’t know) | h  m  3 | h  m  3 | h  m  3 | h  m  3 | h  m  3. | h  m  3 | h  m  3 | h  m  3 | h  m  3 | h  m  3 |
| **12. How many hours and minutes of homework did (Name) do last week?**  1. Hours  2. Minutes  3.DK (Don’t know) | h  m  3 | h  m  3 | h  m  3 | h  m  3 | h  m  3. | h  m  3 | h  m  3 | h  m  3 | h  m  3 | h  m  3 |
| **13. In the last 12 months, how much was spent on (Name) for school fees, registration fees and other dues?**  1. GH¢ | c | c | c | c | c | c | c | c | c | c |
| **14 In the last 12 months, how much was spent on (Name) with respect to contributions to parent/ teacher association (PTA)?**  1. GH¢ | c | c | c | c | c | c | c | c | c | c |
| **15. In the last 12 months, how much was spent on (Name) for uniforms and sports clothes?**  1. GH¢ | c | c | c | c | c | c | c | c | c | c |
| **16. In the last 12 months, how much was spent on (Name) for books and school supplies?**  1. GH¢ | c | c | c | c | c | c | c | c | c | c |
| **17. In the last 12 months, how much was spent on (Name) for transportation to and from school?**  1. GH¢ | c | c | c | c | c | c | c | c | c | c |
| **18. In the last 12 months, how much was spent on (Name) for food, boarding and/or lodging at school?**  1. GH¢ | c | c | c | c | c | c | c | c | c | c |
| **19. In the last 12 months, how much was spent on (Name) for expenses on extra classes?**  1. GH¢ | c | c | c | c | c | c | c | c | c | c |
| **20. In the last 12 months, how much was spent on (Name) for in-kind expenses?**  1. GH¢ | c | c | c | c | c | c | c | c | c | c |
| **21. If cannot break down, what was the total schooling expenditure spent on (Name) in the last 12 months?**  1. GH¢ | c | c | c | c | c | c | c | c | c | c |
| **25. Does (Name) have access to all the textbooks needed for school?**  1. yes, has all,.  2. has some, but not all,  3. has none | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. |
| **31. Does (Name) participate in a free feeding program at school?**  1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No |
| **38a. In general, how often would you say teachers are absent from NAME’s School?**   1. **Almost never** 2. **Sometimes** 3. **Usually** 4. **Almost always** | \_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_ |

# SECTION 5 – HOUSEHOLD ASSETS

**RESPONDENT:** HH Head, Spouse or person most knowledgeable about farm tools/animals, financial assets, and transfers.

### Part A: Farm Assets

**i.** **Animals in the Household**

|  |
| --- |
| **0. Does your household own livestock that it uses for production or for food?**  1. Yes 2. No >> Part A ii. |

|  | **A. Draught animal (donkey, horse, bullock)** | **B. Cattle** | **C. Sheep** | **D. Goats** | **E. Pigs** | **F. Rabbits** | **G. Chickens/ Roosters** | **H. Other 1**  \_\_\_\_\_\_\_\_ | **I. Other 2**  \_\_\_\_\_\_\_\_ | **J. Other 3**  \_\_\_\_\_\_\_\_ |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1a Do you keep this animal?**  **Yes........1 No.........2 >>next animal** |  |  |  |  |  |  |  |  |  |  |
| **1. How many (…) are currently possessed by people in this household?**  1. Number (If zero, next animal) | 1.\_\_\_\_\_\_\_\_\_  no. | 1.\_\_\_\_\_\_\_\_\_  no. | 1.\_\_\_\_\_\_\_\_\_  no. | 1.\_\_\_\_\_\_\_\_\_  no. | 1.\_\_\_\_\_\_\_\_\_  no. | 1.\_\_\_\_\_\_\_\_\_  no. | 1.\_\_\_\_\_\_\_\_\_  no. | 1.\_\_\_\_\_\_\_\_\_  no. | 1.\_\_\_\_\_\_\_\_\_  no. | 1.\_\_\_\_\_\_\_\_\_  no. |
| **2. List the IDs of up to two people who own this animal?**  1. Owner 1  2. Owner 2  3. Owned by whole household (Code HH) | 1. \_\_\_\_\_ ID  2. \_\_\_\_\_ ID  3. \_\_\_\_\_HH | 1. \_\_\_\_\_ ID  2. \_\_\_\_\_ ID  3. \_\_\_\_\_HH | 1. \_\_\_\_\_ ID  2. \_\_\_\_\_ ID  3. \_\_\_\_\_HH | 1. \_\_\_\_\_ ID  2. \_\_\_\_\_ ID  3. \_\_\_\_\_HH | 1. \_\_\_\_\_ ID  2. \_\_\_\_\_ ID  3. \_\_\_\_\_HH | 1. \_\_\_\_\_ ID  2. \_\_\_\_\_ ID  3. \_\_\_\_\_HH | 1. \_\_\_\_\_ ID  2. \_\_\_\_\_ ID  3. \_\_\_\_\_HH | 1. \_\_\_\_\_ ID  2. \_\_\_\_\_ ID  3. \_\_\_\_\_HH | 1. \_\_\_\_\_ ID  2. \_\_\_\_\_ ID  3. \_\_\_\_\_HH | 1. \_\_\_\_\_ ID  2. \_\_\_\_\_ ID  3. \_\_\_\_\_HH |
| **14. How many (animal) did you purchase in the last 12 months?**  1. Number | 1. \_\_\_\_\_\_\_\_  If zero, next animal | 1. \_\_\_\_\_\_\_\_  If zero, next animal | 1. \_\_\_\_\_\_\_\_  If zero, next animal | 1. \_\_\_\_\_\_\_\_  If zero, next animal | 1. \_\_\_\_\_\_\_\_  If zero, next animal | 1. \_\_\_\_\_\_\_\_  If zero, next animal | 1. \_\_\_\_\_\_\_\_  If zero, next animal | 1. \_\_\_\_\_\_\_\_  If zero, next animal | 1. \_\_\_\_\_\_\_\_  If zero, next animal | 1. \_\_\_\_\_\_\_\_  If zero, next animal |
| **15. What was the total cost of the purchases of (animal)?** | c | c | c | c | c | c | c | c | c | c |

**Aii. Tools**

**Q13.**

**a.) How many of the following tools (in working condition) does your household own?**

**b.) List two owners of these tools. If all are owned by whole household, code HH**

|  | **Do you have this item?**  **Yes .......1 NO........2 >>Next tool** | **A. Number** | **B. ID of Two Owners** |
| --- | --- | --- | --- |
| 1. 2-wheel tractor |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 2. 4-wheel tractor |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 3. Cane crusher |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 4. Hoe |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 5. Axe |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 6. Rake |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 7. Shovel |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 8. Pick(-axe) |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 9. Sickle/reaping hook |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 10. Harrow |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 11. Tiller |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 12. Water pump |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 13. Irrigation pipe |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 14. Cutlass |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 15. Trailer / cart |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 16. Spraying machine |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 17. Outboard motor |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 18. Canoe |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 19. Plough |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 20. Other, specify |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 21. Other, specify |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 22. Other, specify |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 23. Other, specify |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 24. Other, specify |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 25. Other, specify |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 26. Other, specify |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 27. Other, specify |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 28. Other, specify |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 29. Other, specify |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 30. Other, specify |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |

### Part B: Non-Financial Assets:

**i. Durable goods**

**14.**

**a.) How many of the following goods (in working condition) does your household own?**

**b.) List two owners of these good. if owned by whole household, code HH**

|  | **Do you have this item?**  **Yes .......1 NO........2 >> next item** | **A. Number** | **B. ID of Two owners** |
| --- | --- | --- | --- |
| 1. Room Furniture ***(SETS)*** |  | ////////////////////////////////////////////////////////////  //////////////////////////////////////////////////////////// | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 2. Sewing Machine |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 3. Stove (kerosene) |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 4. Stove (electric) |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 5. Stove (gas) |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 6. Refrigerator |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 7. Freezer |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 8. Air conditioner |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 9. Fan |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 10. Radio |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 11. Radio Cassette Player |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 12. Record Player |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 13. 3-in-1 radio system |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 14. Video Player |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 15. Desktop Computer |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 16. Laptop Computer |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 17. Printer |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 18. Computer accessories |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 19. camcorder/video camera |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 20. Camera |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 21. Iron (electric) |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 22. Bicycle |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 23. Motorcycle |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 24. Books (Textbooks) |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 25. Cell (mobile) Phone handset |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 26. Telephone (Fixed line) |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 27. TV |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 28. Parabolic satellite |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 29. Blenders |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 30. VCD/DVD Player |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 31. Washing machine/ driers |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 32. Lanterns/ gas lights |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 33. Buckets |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 34. Motor-driven lawn mower |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 35. Electric Power Generator |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 36. Car |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 37. Truck/ bus |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 38. Musical instruments |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 39. Game cards (chess, ludo, etc) |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 40. Toys |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 41. Cutlery/ Utensils |  | ////////////////////////////////////////////////////////////  //////////////////////////////////////////////////////////// | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 42. Cups and plates |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 43. Torches |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 44. Land (non-farm) |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 51. Box Iron |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 45. Other, specify |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 46. Other, specify |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 47. Other, specify |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 48. Other, specify |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |
| 49. Other, specify |  | a. \_\_\_\_\_\_\_ | b. \_\_\_\_\_\_\_ ID \_\_\_\_\_\_ ID |

### Part C: Financial Assets

**i. Borrowing**

|  |
| --- |
| **0. Does anyone in this household currently owe money or goods to other people or have** outstanding **loans from banking institutions?**    1**. Yes 2. No >> Part Cii** |

*Enumerator: Include only loans that the household has borrowed from a source outside the household but not fully repaid. List the loans in order of date borrowed (that is, the older debts first before the newer debts)*

|  | A. Debt 1 | B. Debt 2 |
| --- | --- | --- |
| **1. When was this loan contracted?**  1. Year  2. Month | yyyy  mm | yyyy  mm |
| **2. ID of person in the household who owes this debt?**  1. ID | 1.\_\_\_\_\_\_\_\_\_\_\_  ID | 1.\_\_\_\_\_\_\_\_\_\_\_  ID |
| **3. Is this the person who actually answered these questions:**  1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No |
| **4. What is the source of this loan?**  1. State bank – SB >>6  2. Private bank – PB>>6  3.Rural bank - RB>>6  4. Cooperative - CO>>6  5. Govt. agency - GO>>6  6. NGO -- NG>>6  7. Business firm - BF>>6  8. Employer - EM  9. Moneylender - ML  10. Trader - TR  11. Farmer - FA  12. Relative / neighbour / friend - RN  13. Community epicenter - CE  14. Other (specify) – OT | 1. SB  2. PB  3.RB  4. CO  5. GO  6. NG  7. BF  8. EM 9. ML  10. TR  11. FA  12. RN  13. CE  14. OT  \_\_\_\_\_\_\_\_\_ | 1. SB  2. PB  3.RB  4. CO  5. GO  6. NG  7. BF  8. EM 9. ML  10. TR  11. FA  12. RN  13. CE  14. OT  \_\_\_\_\_\_\_\_\_ |
| **5. If loan came from an individual in the community, what is your relationship with this person?**  1.Neighbour/Friend  2. Other Family Relation ***(i.e. Non-HH Member)***  3.Other Non-Relatives | 1  2  3 | 1  2  3 |
| **6. What was the intended purpose for which the loan was contracted?**  ***(Circle all that apply)***  1. Agricultural land / equipment - AG  2. Agricultural inputs - AI  3. Business - BU  4. Housing - HO  5. Education / training -- ED  6. Health - HE  7. Ceremonies (weddings, funerals, etc.) - WE  8. Vehicle , Motor cycle- VE  9. Other consumer goods - CG  10. Other (specify) – OT | 1. AG  2. AI  3. BU  4. HO  5. ED  6. HE  7. WE  8. VE  9. CG  10. OT\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 1. AG  2. AI  3. BU  4. HO  5. ED  6. HE  7. WE  8. VE  9. CG  10. OT\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **7. What is the principal amount of this loan?**  **(Amount in** Ghana Cedis) | \_\_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_\_ c |
| **9a. What is the total abount that you are/were expected to pay (principal plus interest)?**  **(Amount in Ghana Cedis)** |  |  |
| **13. What is the amount paid back on this loan in the last 12 months?**  **(Amount in** Ghana Cedis) | \_\_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_\_ c |
| **14. What is the outstanding amount of the loan if any?**  **(Amount in** Ghana Cedis) | \_\_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_\_ c |

**ii. Lending**

|  |
| --- |
| **15. Is anyone in this household currently owed money or goods?**  1. Yes 2. No >> Part C iii. |

*Include only loans to others outside the household. Organize this list of loans by the amount owed from highest to lowest.*

|  | Credit 1 | Credit 2 |
| --- | --- | --- |
| **16. ID of person in the household to whom this money or goods are owed:**  1. ID | 1. \_\_\_\_\_\_\_\_\_\_\_  ID | 1. \_\_\_\_\_\_\_\_\_\_\_  ID |
| **18. To whom was this loan given?**  1. Employee - EM  2. Tenant - TE  3. Relative - RE  4. Neighbor / friend - NF  5. other (specify) - OT | 1. EM  2. TE  3. RE  4. NF  5. OT  \_\_\_\_\_\_\_\_\_\_\_\_\_ | 1. EM  2. TE  3. RE  4. NF  5. OT  \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **20. When was this loan made?**  1. Year  2. Month  3. Day (Code 98 if DK) | 1. \_\_\_\_\_\_\_\_\_  2. \_\_\_\_\_\_\_\_\_  3. \_\_\_\_\_\_\_\_\_ | 1. \_\_\_\_\_\_\_\_\_  2. \_\_\_\_\_\_\_\_\_  3. \_\_\_\_\_\_\_\_\_ |
| **22. What is the principal amount of this loan?**  1. Cedis | \_\_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_\_ c |
| **23a. What is the total amount that you are/were supposed to receive (principal plus the interest)?** | \_\_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_\_ c |
| **24. What is the amount paid back on this loan in the last 12 months?**  1. Ghana Cedis | \_\_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_\_ c |

**iii. Out Transfers**

|  |
| --- |
| **26. Is there anyone (including household members) who does not currently live in this household to whom this household has sent money, goods or gifts in the last 12 months without expecting to be repaid?**  1. Yes 2. No >> Part C iv |

|  | Payment 1 | Payment 2 | Payment 3 | Payment 4 |
| --- | --- | --- | --- | --- |
| **27. ID of Household Member who sent the money/gift/goods** | \_\_\_\_\_\_\_\_ID | \_\_\_\_\_\_\_\_ID | \_\_\_\_\_\_\_\_ID | \_\_\_\_\_\_\_\_ID |
| **27a. Is the receipient a household member?** | 1. Yes>>30  2. No | 1. Yes>>30  2. No | 1. Yes>>30  2. No | 1. Yes>>30  2. No |
| **29. If not a household member, is this person a blood relative or spouse of a household member?**  1. Yes 2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No |
| **30. Where does this recipient live?**  1. This town/village - TT  2. Sekondi/Takoradi - ST  3. Cape Coast - CC  4. Accra - AC  5. Ho - HO  6. Koforidua - KO  7. Kumasi - KU  8. Sunyani - SU  9. Tamale - TA  10. Bolgatanga - BO  11. Wa - WA  12. Other urban - OU  13. Other rural - OR  14. Other ECOWAS - OE  15. Africa other than ECOWAS - AE  16. Outside Africa - OA  [**If Q30 is not equal to 1, skip to Q33**] | 1. TT  2. ST  3. CC  4. AC  5. HO  6. KO  7. KU  8. SU  9. TA  10. BO  11. WA  12. OU  13. OR  14. OE  15. AE  16. OA | 1. TT  2. ST  3. CC  4. AC  5. HO  6. KO  7. KU  8. SU  9. TA  10. BO  11. WA  12. OU  13. OR  14. OE  15. AE  16. OA | 1. TT  2. ST  3. CC  4. AC  5. HO  6. KO  7. KU  8. SU  9. TA  10. BO  11. WA  12. OU  13. OR  14. OE  15. AE  16. OA | 1. TT  2. ST  3. CC  4. AC  5. HO  6. KO  7. KU  8. SU  9. TA  10. BO  11. WA  12. OU  13. OR  14. OE  15. AE  16. OA |
| **31. If given to an individual in this village, what is your relationship with this person?**  1.Neighbour/Friend  2. Other Family Relation ***(i.e. Non-HH Member)***  3.Other Non-Relatives | 1  2  3 | 1  2  3 | 1  2  3 | 1  2  3 |
| **33. What were the** three **main reasons for this transfer?**  ***(Circle not more than three)***  1. Daily consumption –DC  2. Housing – HO  3. Business – BU  4. Savings – SA  5. Education – ED  6. Health – HE  7. Funeral – FU  8. Other ceremony – OC  9. Agriculture – AG 10. Other, (specify) | 1. DC  2. HO  3. BU  4. SA  5. ED  6. HE  7. FU  8. OC  9. AG  10. OT  \_\_\_\_\_\_\_\_\_\_\_ | 1. DC  2. HO  3. BU  4. SA  5. ED  6. HE  7. FU  8. OC  9. AG  10. OT  \_\_\_\_\_\_\_\_\_\_\_ | 1. DC  2. HO  3. BU  4. SA  5. ED  6. HE  7. FU  8. OC  9. AG  10. OT  \_\_\_\_\_\_\_\_\_\_\_ | 1. DC  2. HO  3. BU  4. SA  5. ED  6. HE  7. FU  8. OC  9. AG  10. OT  \_\_\_\_\_\_\_\_\_\_\_ |
| **34. What was the total** amount of cash **given to this person in the last 12 months?**  1.Ghana Cedis | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c |
| **35. What was the total** value of food **given to this person in the last 12 months?**  1. Ghana Cedis | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c |
| **36. What was the total** value of other goods **given to this person in the last 12 months?**  1. Ghana Cedis | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c |

**iv. In Transfers**

|  |
| --- |
| **38. Is there anyone (including household members) who does not currently live in this household from whom this household has received money or goods in the last year that you will not pay back?**  1. Yes 2. No >> Part C v |

|  | Receipt 1 | Receipt 2 | Receipt 3 | Receipt 4 |
| --- | --- | --- | --- | --- |
| **39. ID of the person who received the transfer:**  ID | \_\_\_\_\_\_\_\_\_ID | \_\_\_\_\_\_\_\_\_ID | \_\_\_\_\_\_\_\_\_ID | \_\_\_\_\_\_\_\_\_ID |
| **39a. Is the sender a household member?**  1. Yes>>41 2. No | 1. Yes>>41  2. No | 1. Yes>>41  2. No | 1. Yes>>41  2. No | 1. Yes>>41  2. No |
| **40. If sender is not a household member, is this person a blood relative or spouse of a household member?**  1. Yes 2. No | 1.  2. | 1.  2. | 1.  2. | 1.  2. |
| **41. Where does this sender live?**  1. This town/village - TT  2. Sekondi/Takordi - ST  3. Cape Coast - CC  4. Accra - AC  5. Ho - HO  6. Koforidua - KO  7. Kumasi - KU  8. Suyani - SU  9. Tamale - TA  10. Bolgatanga - BO  11. Wa - WA  12. other urban - OU  13. other rural - OR  14. other ECOWAS - OE  15. Africa other than ECOWAS - AO  16. outside Africa - OA | 1. TT  2. ST  3. CC  4. AC  5. HO  6. KO  7. KU  8. SU  9. TA  10. BO  11. WA  12. OU  13. OR  14. OE  15. AO  16. OA | 1. TT  2. ST  3. CC  4. AC  5. HO  6. KO  7. KU  8. SU  9. TA  10. BO  11. WA  12. OU  13. OR  14. OE  15. AO  16. OA | 1. TT  2. ST  3. CC  4. AC  5. HO  6. KO  7. KU  8. SU  9. TA  10. BO  11. WA  12. OU  13. OR  14. OE  15. AO  16. OA | 1. TT  2. ST  3. CC  4. AC  5. HO  6. KO  7. KU  8. SU  9. TA  10. BO  11. WA  12. OU  13. OR  14. OE  15. AO  16. OA |
| **43. What were the three main uses of the transfer?**  *(Circle not more than three)*  1. Daily consumption –DC  2. Housing – HO  3. Business – BU  4. Savings – SA  5. Education – ED  6. Health – HE  7. Funeral – FU  8. Other ceremony – OC  9. Agriculture – AG 10. Other, specify | 1. DC  2. HO  3. BU  4. SA  5. ED  6. HE  7. FU  8. OC  9. AG  10. OT \_\_\_\_\_\_\_\_\_\_\_ | 1. DC  2. HO  3. BU  4. SA  5. ED  6. HE  7. FU  8. OC  9. AG  10. OT \_\_\_\_\_\_\_\_\_\_\_ | 1. DC  2. HO  3. BU  4. SA  5. ED  6. HE  7. FU  8. OC  9. AG  10. OT \_\_\_\_\_\_\_\_\_\_\_ | 1. DC  2. HO  3. BU  4. SA  5. ED  6. HE  7. FU  8. OC  9. AG  10. OT \_\_\_\_\_\_\_\_\_\_\_ |
| **44. What was the total amount of cash received from this person in the last 12 months?**  1. Ghana Cedis | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c |
| **45. What was the total** value of food **received from this person in the last 12 months?**  1. Ghana Cedis | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c |
| **46. What was the total** value of other **goods received from this person in the last 12 months?**  1. Ghana Cedis | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c |

**v: In transfer (Non-Persons)**

|  |
| --- |
| **48. Is there any Institution or Organization from whom this household has received money or goods in the last 12 months that you will not pay back?**  1. Yes 2. No >> Part C vi-savings |

|  | Receipt 1 | Receipt 2 |
| --- | --- | --- |
| **49. ID of the person who received the transfer:**  ID | \_\_\_\_\_\_\_\_\_HHMID | \_\_\_\_\_\_\_\_\_HHMID |
| **50. Which of these institutions/ organization did (Name) receive money/goods from in the last year?**  1. Government (LEAP)  2.Government (Other)  3.Non-Governmental Organization  4. Religious Organization | 1  2  3  4 | 1  2  3  4 |
| **52. What were the three main uses of the transfer?**  ***(Circle not more than three)***  1. Daily consumption –DC  2. Housing – HO  3. Business – BU  4. Savings – SA  5. Education – ED  6. Health – HE  7. Funeral – FU  8. Other ceremony – OC  9. Agriculture – AG 10. Other, specify | 1. DC  2. HO  3. BU  4. SA  5. ED  6. HE  7. FU  8. OC  9. AG  10. OT  \_\_\_\_\_\_\_\_\_\_\_ | 1. DC  2. HO  3. BU  4. SA  5. ED  6. HE  7. FU  8. OC  9. AG  10. OT  \_\_\_\_\_\_\_\_\_\_\_ |
| **53. What was the total amount of cash received from this institution in the last 12 months?**  (Amount in Ghana Cedis) | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c |
| **54. What was the total** value of food **received from this institution in the last 12 months?**  (Amount in Ghana Cedis) | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c |
| **55. What was the total** value of other **goods received from this institution in the last 12 months?**  (Amount in Ghana Cedis) | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c |

**vi. Savings**

|  |
| --- |
| **57. Does this household have any savings either at home or in an institution?**  1. Yes 2. No >> Next Section |

|  | Savings 1 | Savings 2 | Savings 3 |
| --- | --- | --- | --- |
| **58. Does this Household have any savings that are kept at home (i.e. not in a bank or Susu)?**  1. Yes  2. No >> 61 | 1. Yes  2. No | 1. Yes  2. No | 1. Yes  2. No |
| **59. ID of the principal person who own/ control this savings:**  ID | \_\_\_\_\_\_\_\_ID | \_\_\_\_\_\_\_\_ID | \_\_\_\_\_\_\_\_ID |
| **60. What is the amount you have saved at home?**  (Amount in Ghana Cedis) | \_\_\_\_\_\_\_\_\_ c |  | \_\_\_\_\_\_\_\_\_ c |
| **61. Does this Household have any savings kept with a banking institution, *susu* or any other saving society/group?**  1. Yes  2. No >> Next Section | 1.  2. | 1.  2. | 1.  2. |
| **62. ID of the principal person who own/ control this savings:**  ID | \_\_\_\_\_\_\_\_ID | \_\_\_\_\_\_\_\_ID | \_\_\_\_\_\_\_\_ID |
| **63. At which institution is this account?**    1. State bank - SB  2. Private bank - PB  3. Cooperative – CO  4.Rural bank  5. Susu  6.Other specify | 1  2  3  4  5  \_\_\_\_\_\_\_\_\_\_\_\_\_ | 1  2  3  4  5  \_\_\_\_\_\_\_\_\_\_\_\_\_ | 1  2  3  4  5  \_\_\_\_\_\_\_\_\_\_\_\_ |
| **64. What is the current balance?**  1. Cedis | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c |

# SECTION 6 – AGRICULTURAL PRODUCTION

***RESPONDENT:*** *To be asked of most knowledgeable person on each subject*

*Note:*

* *Plot/ Farmland:* This defines a contiguous piece of land held by a given member(s) of the household on which crop(s) and/or animal(s) are grown/raised under the same cultural/husbandry practices.
* For example, one would consider as two different plots if on a hectare of land, a farmer grows maize using organic farming cultural practices (for a specific market for instance) on a half of the land while the other half is left fallow or even cultivated with maize but under general farming practices involving the application of inorganic inputs, etc. The first half of the hectare of land with the ‘organic’ farm then constitute one plot while the other half (which is left fallow or with ‘inorganic’ maize farm) constitute another plot on its own.
* Similarly, if a farmer has a maize farm at the east end of the village while the same variety of maize is grown at the same time and with similar cultural practices on another piece of land at the west end of the village, then by virtue of not being contiguous, the farmer has two different plots or farmlands to respond to.

Part A: Land Information

*(TO BE ASKED OF THE HOLDER OF EACH PLOT)*

**NOW WE’RE GOING TO ASK DETAILED INFORMATION ABOUT ALL PLOTS OWNED OR USED BY MEMBERS OF THE HOUSEHOLD. IT IS PREFERABLE THAT THESE QUESTIONS BE ASKED TO THE HOLDER OF EACH PLOT. ANSWER ABOUT ALL PLOTS OF LAND CURRENTLY OWNED OR USED**

|  |
| --- |
| **0.0 Has any member of the household owned and/or used (operated) any plot over the last 12 months?**  1. Yes 2.No >> Part B**ii (Sales from other produce )** |

**I.CROPS PRODUCED**

**1. What were the two (2) main crops grown on plots over the last 12 months (list in order of importance per plot)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Plot 1** | | | **Plot 2** | | |
|  | **Crop Name** | **Code** | **Proportion of plot covered with [CROP] (%)** | **Crop Name** | **Code** | **Proportion of plot covered with [CROP] (%)** |
| **Crop 1** |  |  |  |  |  |  |
| **Crop 2** |  |  |  |  |  |  |

**ii. BACKGROUND**

|  |  |  |
| --- | --- | --- |
|  | **Plot 1** | **Plot 2** |
| **2. ID of plot holder or cultivator and person interviewed**  1. ID of owner / user  2. ID of person interviewed | 1.  2. | 1.  2. |
| **4. What is the size of this plot?**  **1. Size** |  |  |
| **5. In what unit is this size measured/ reported?**  1. Acre – AC  2. Pole – PO  3. Rope – RO  4. Plot – PL  5. Other (specify) – OT | 1. AC  2.PO  3.RO  4.PL  5. OT | 1. AC  2.PO  3.RO  4.PL  5. OT |

1. **LAST MAJOR SEASON:** CROP (HARVESTS) 1:

*ASK ABOUT CROP HARVESTS IN ORDER OF MOST IMPORTANT TO LEAST IMPORTANT*

|  | **Plot 1** | **Plot 2** |
| --- | --- | --- |
| **15. How many different crop harvests were made in total from this plot?** |  |  |
| **16. ID of crop and part harvested**  1. ID (See Codebook)  2. ID of part of crop harvested. (e.g. Cocoa, Cocoa Leaves) | 1. \_\_\_\_crop  2. \_\_\_\_part | 1. \_\_\_\_crop  2. \_\_\_\_part |
| **Crop part codes: 01. Leaves 02. Branches 03. Bark 04. Sap 05. Stem/stalk /sacker 06. Roots/ tuber 07. Friuts/Seeds/Nuts 08. Bulb (onions*)*** | | |
| **17. What is the quantity of the crop harvested in the last major season?**  1. Quantity  2. Unit  **(See codebook)** | 1.\_\_\_\_\_\_Qty  2. \_\_\_\_\_\_\_  Unit | 1.\_\_\_\_\_\_Qty  2. \_\_\_\_\_\_\_  unit |
| **18. What is the market value of the quantity harvested in the last major season?**  1. GH cedis | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c |
| **19. What was the total revenue from this crop harvest (sold)?**  1. GH cedis | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c |
| **20. Is/was any of this crop part still growing on this plot after this harvest?**  1. Yes  2. No >> A22 | 1. Yes  2. No | 1. Yes  2. No |
| **21. What was/would be its value when sold?**  1. GH cedis | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c |
| **22. While in the field, was any of the crop lost to rotting/pests etc?**  1. Yes  2. No >> A24 | 1. Yes  2. No | 1. Yes  2. No |
| **23. What percent of the crop was lost?**  1. Percent lost | 1. \_\_\_\_\_\_% | 1. \_\_\_\_\_\_% |

**LAST MAJOR SEASON: CROP (HARVESTS) 2**

*ASK ABOUT CROP HARVESTS IN ORDER OF MOST IMPORTANT TO LEAST IMPORTANT*

|  | **Plot 1** | **Plot 2** |
| --- | --- | --- |
| **24. ID of crop and part harvested**  1. ID (See Codebook)  2. ID of part of crop harvested. (e.g. Cocoa, Cocoa Leaves) | 1. \_\_\_\_crop  2. \_\_\_\_part | 1. \_\_\_\_crop  2. \_\_\_\_part |
| **Crop part codes: 01. Leaves 02. Branches 03. Bark 04. Sap 05. Stem/stalk /sacker 06. Roots/ tuber 07. Friuts/Seeds/Nuts 08. Bulb (onions*)*** | | |
| **25. What is the quantity harvested in the last major season?**  1. Quantity  2. Unit | 1.\_\_\_\_\_\_Qty  2. \_\_\_\_unit | 1.\_\_\_\_\_\_Qty  2. \_\_\_\_unit |
| **26. What is the market value of the total quantity harvested in the last major season?**  1.GH cedis | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c |
| **27. What was the total revenue from this crop harvest (sold)?**  1. GH cedis | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c |
| **28. Is/was any of this crop part still growing on this plot after this harvest?**  1. Yes  2. No >>30 | 1. Yes  2. No | 1. Yes  2. No |
| **29. What was/would be its value when sold?**  1. GH cedis | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c |
| **30. While in the field, was any of the crop lost to rotting/pests etc?**  1. Yes  2. No >> Part Av | 1. Yes  2. No | 1. Yes  2. No |
| **31. What percent of the crop was lost?**  1. Percent lost | -----------% | -----------% |

**V. CHEMICAL INPUTS**

**LAST MAJOR SEASON**: ANSWER FOR ALL PLOTS OF LAND CURRENTLY OWNED OR USED. USE THE SAME PLOT NUMBER AS IN THE PREVIOUS PAGES***.***

|  |
| --- |
| **40.**  **In the last major season, have there been any chemicals such as fertilizer or pesticide that you apply to any of your plots?**  1. Yes 2. No >> Next part |

**CHEMICAL 1**

|  |  |  |
| --- | --- | --- |
|  | **Plot 1** | **Plot 2** |
| **40a.**  **In the last major season, have you used any chemical on this plot?**  1. Yes  2. No >> next Plot | 1. Yes  2. No >> next Plot | 1. Yes  2. No >> next Plot |
| **41. What is the name of the chemical used on this plot?**   1. Name 2. Code (See Code book**)** 3. Other, specify |  |  |
| **42.**  **What type of chemical is this?**  1. Fertilizer (organic) – FO  2. Fertilizer (inorganic) – FI  3. Herbicide – HC  4. Insecticide – IC  5. Fungicide – FC  6. Other (specify purpose) – OT | 1. FO  2. FI  3. HC  4. IC  5. FC  6. OT  \_\_\_\_\_\_\_\_\_ | 1. FO  2. FI  3. HC  4. IC  5. FC  6. OT  \_\_\_\_\_\_\_\_\_ |
| **44. What quantity of this chemical did you use on this plot?**  i. Quantity  ii. Unit | \_\_\_\_\_\_\_qty \_\_\_\_\_\_\_unit | \_\_\_\_\_\_\_qty \_\_\_\_\_\_\_unit |
| **45. What was the value of the amount of this chemical that you used?**  (Amount in Ghana Cedis) | \_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_ c |

**CHEMICAL 2**

|  |  |  |
| --- | --- | --- |
|  | **Plot 1** | **Plot 2** |
| **50a.**  **In the last major season, have you used another chemical on this plot?**  1. Yes  2. No >> next Plot | 1. Yes  2. No >> next Plot | 1. Yes  2. No >> next Plot |
| **50. What is the name of the chemical used on this plot?**   1. Name 2. Code (See Code book**)** 3. Other, Specify |  |  |
| **51.**  **What type of chemical is this?**  1. Fertilizer (organic) – FO  2. Fertilizer (inorganic) – FI  3. Herbicide – HC  4. Insecticide – IC  5. Fungicide – FC  6. Other (specify purpose) – OT | 1. FO  2. FI  3. HC  4. IC  5. FC  6. OT\_\_\_\_\_\_\_\_\_ | 1. FO  2. FI  3. HC  4. IC  5. FC  6. OT\_\_\_\_\_\_\_\_\_ |
| **53. What quantity of this chemical did you use on this plot?**  i. Quantity ii. Unit | \_\_\_\_\_\_\_qty \_\_\_\_\_\_\_unit | \_\_\_\_\_\_\_qty \_\_\_\_\_\_\_unit |
| **54. What was the value of the amount of this chemical that you used?**  (Amount in Ghana Cedis) | \_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_ c |

**CHEMICAL 3**

|  |  |  |
| --- | --- | --- |
|  | **Plot 1** | **Plot 2** |
| **59a.**  **In the last major season, have you used another chemical on this plot?**  1. Yes  2. No >> next Plot | 1. Yes  2. No >> next Plot | 1. Yes  2. No >> next Plot |
| **59. What is the name of the chemical used on this plot?**   1. Name 2. Code (See Code book**)** 3. Other, specify |  |  |
| **62. What quantity of this chemical did you use on this plot?**  i. Quantity ii. Unit | \_\_\_\_\_\_\_qty \_\_\_\_\_\_\_unit | \_\_\_\_\_\_\_qty \_\_\_\_\_\_\_unit |
| **63. What was the value of the amount of this chemical that you used?**  (Amount in Ghana Cedis) | \_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_ c |

**VI. SEEDS/SEEDLINGS: LAST MAJOR SEASON**

|  |
| --- |
| **68.**  **In the last major season, have there been any seeds/seedlings used on this plot?**  1. Yes 2. No >> Next Part |

**SEED/SEEDLING 1**

| **SEED/SEEDLING 1** | **Plot1** | **Plot 2** |
| --- | --- | --- |
| **69.**  **Crop Code**  1. Crop code  2. Name | 1. \_\_\_\_\_\_\_\_  2.\_\_\_\_\_\_\_\_ | 1. \_\_\_\_\_\_\_\_  2.\_\_\_\_\_\_\_\_ |
| **70**. What was the type of seed used?  1.improved seeds  2. local seeds (gift/bought)  3. DK  4.farmers own seeds | 1  2.  3.  4. | 1  2.  3.  4. |
| **71. What was the source of the seed used?**  1.MOFA/Other Government Source  2.NGO  3.Private Company  4.Farmer’s own farm  5.FBO  6.Other, Specify | 1. MOFA  2. NGO  3. PRIV  4. OWN  5.FBO  6. OT  \_\_\_\_\_\_\_\_\_\_\_\_ | 1. MOFA  2. NGO  3. PRIV  4. OWN  5.FBO  6. OT  \_\_\_\_\_\_\_\_\_\_\_\_ |
| **73.**  **What was the value of this seed?**  (Amount in Ghana Cedis) | \_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_ c |

**SEED/SEEDLING 2**

| **SEED/SEEDLING 2** | **Plot1** | **Plot 2** |
| --- | --- | --- |
| **74. Crop Code**  1. Crop code  2. Name | 1.\_\_\_\_\_\_\_\_  2.\_\_\_\_\_\_\_\_ | 1.\_\_\_\_\_\_\_\_  2.\_\_\_\_\_\_\_\_ |
| **75**. What was the type of seed used?  1.improved seeds  2. local seeds (gift/bought)  3. DK  4.farmers own seeds | 1  2.  3.  4. | 1  2.  3.  4. |
| **76. What was the source of the seed used?**  1.MOFA/Other Government Source  2.NGO  3.Private Company  4.Farmer’s own farm  5.FBO  6.Other, Specify | 1. MOFA  2. NGO  3. PRIV  4. OWN  5.FBO  6. OT  \_\_\_\_\_\_\_\_\_\_\_\_ | 1. MOFA  2. NGO  3. PRIV  4. OWN  5.FBO  6. OT  \_\_\_\_\_\_\_\_\_\_\_\_ |
| **78. What was the value of this seed?**  (Amount in Ghana Cedis) | \_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_ c |

**SEED/SEEDLING 3**

| **SEED/SEEDLING 3** | **Plot1** | **Plot 2** |
| --- | --- | --- |
| **79. Crop Code**  1. Crop code  2. Name | 1.\_\_\_\_\_\_\_\_  2.\_\_\_\_\_\_\_\_ | 1.\_\_\_\_\_\_\_\_  2.\_\_\_\_\_\_\_\_ |
| **80**. What was the type of seed used?  1.improved seeds  2. local seeds (gift/bought)  3. DK  4.farmers own seeds | 1  2.  3.  4. | 1  2.  3.  4. |
| **81. What was the source of the seed used?**  1.MOFA/Other Government Source  2.NGO  3.Private Company  4.Farmer’s own farm  5.FBO  6.Other, Specify | 1. MOFA  2. NGO  3. PRIV  4. OWN  5.FBO  6. OT  \_\_\_\_\_\_\_\_\_\_\_\_ | 1. MOFA  2. NGO  3. PRIV  4. OWN  5.FBO  6. OT  \_\_\_\_\_\_\_\_\_\_\_\_ |
| **83. What was the value of this seed?**  (Amount in Ghana Cedis) | \_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_ c |

**VII. LABOR INPUTS** a.) LAST MAJOR SEASON

|  |  |  |
| --- | --- | --- |
|  | **Plot 1** | **Plot 2** |
| **84. Months for the major season of dominant crop?** | from    to | from  to |
| **THE FOLLOWING QUESTIONS PERTAIN TO LABOR USE ON LAND, EXAMPLE CLEARING OR WEEDING, BEFORE PLANTING, SEEDING/NURSERY PREPARATION, PLANTING AND TRANSPLANTING DURING THE MAJOR SEASON:** | | |
| **85. How much hired labor was provided by men?**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **86. How much hired labor was provided by women?**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **87.** **How much hired labor was provided by children (under 15 years)?**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **91. How much family labor is worked by men? (including exchanged labor)**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **92. How much family labor is worked by women? (including exchanged labor)**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **93. How much family labor is worked by children(under 15 years)? (including exchanged labor)**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **93 a: What is the total amount paid to hired labor for land preparation?**  **Ghana cedis** | \_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_ c |

***THE FOLLOWING QUESTIONS PERTAIN TO LABOR USED ON FIELD MANAGEMENT (WEEDING AFTER PLANTING, FERTILIZED AND PESTICIDE APPLICATIONS, IRRIGATION, MANAGEMENT ETC DURING THE MAJOR SEASON:***

|  | **Plot 1** | **Plot 2** |
| --- | --- | --- |
| **94. How much hired labor was provided by men?**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **95. How much hired labor was provided by women?**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **96.** **How much hired labor was provided by children (under 15 years)?**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **100. How much family labor is worked by men? (including exchanged labor)**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **101. How much family labor is worked by women? (including exchanged labor)**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **102. How much family labor is worked by children? (including exchanged labor)**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **102a: What is the total amount paid to hired labor for field management? Ghana cedis** | \_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_ c |

***THE FOLLOWING QUESTIONS PERTAIN TO LABOR USED ON HARVESTING OF CROPS DURING THE MAJOR SEASON:***

|  | **Plot 1** | **Plot 2** |
| --- | --- | --- |
| **103. How much hired labor was provided by men?**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **104. How much hired labor was provided by women?**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **105.** **How much hired labor was provided by children (under 15 years)?**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **109. How much family labor is worked by men? (including exchanged labor)**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **110. How much family labor is worked by women? (including exchanged labor)**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **111. How much family labor is worked by children? (including exchanged labor)**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **111a: What is the total amount paid for hired labor for harvesting activities?**  (Amount in Ghana Cedis) | \_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_ c |

***THE FOLLOWING QUESTIONS PERTAIN TO LABOR USED ON POST-HARVEST ACTIVITIES (INCLUDING PRESERVATION FOR STORAGE ETC) OF CROPS DURING THE MAJOR SEASON:***

|  | **Plot 1** | **Plot 2** |
| --- | --- | --- |
| **112. How much hired labor was provided by men?**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **113. How much hired labor was provided by women?**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **114.** **How much hired labor was provided by children (under 15 years)?**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **118. How much family labor is worked by men? (including exchanged labor)**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **119. How much family labor is worked by women? (including exchanged labor)**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **120. How much family labor is worked by children? (including exchanged labor)**  1. # of days  2. Average hours per day  3. Average # of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers | 1. \_\_\_\_\_\_\_ no. of days  2. \_\_\_\_\_\_ avg. hrs/day  3. \_\_\_\_\_\_ avg. no. of workers |
| **120a: What is the total amount paid for hired labor for post harvest activities?**  (Amount in Ghana Cedis) | \_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_ c |

### Part B. Crop Sales and Storage

i. Revenue from Crop Production (**repeat these questions for each crop**)

|  |
| --- |
| **1.**  **Were there any crops, harvested on land that your family owns or controls, that were sold to other people last 12 months?**    1. Yes 2. No >> Next Part |

|  | **Crop 1** | **Crop 2** |
| --- | --- | --- |
| **Plot number** |  |  |
| **2.**  **ID of crop/part SOLD**  1. ID  2. ID of part of crop that was harvested. (e.g. Cocoa, Cocoa Leaves) | 1. \_\_\_\_\_\_ crop  2. \_\_\_\_\_\_\_part | 1. \_\_\_\_\_\_ crop  2. \_\_\_\_\_\_\_part |
| **Crop part codes: 01. Leaves 02. Branches 03. Bark 04. Sap 05. Stem/stalk /sacker 06. Roots/ tuber 07. Friuts/Seeds/Nuts 08. Bulb (onions*)*** | | |
| **6a.**  **What was the quantity sold of this crop?** | Qty: \_\_\_\_\_\_\_  Unit: \_\_\_\_\_\_\_ | Qty: \_\_\_\_\_\_\_  Unit:\_\_\_\_\_\_\_ |
| **6b. What was the price per unit?**  (Price in Ghana Cedis)  *(See Unit Codes)* | Price:\_\_\_\_\_ c  Unit: \_\_\_\_\_\_\_ | Price:\_\_\_\_\_ c  Unit: \_\_\_\_\_\_\_ |
| **10. What was the total revenue from this crop?**  (Amount in Ghana Cedis) | \_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_ c |

**Bii. Sales from Other Produce**

Now I would like to ask you about other household sales of produce during the last 12 months

*CODE ID OF PRIMARY HOUSEHOLD MEMBER WHO RECEIVES INCOME FROM EACH SALE*

|  |  |  |
| --- | --- | --- |
| **12. How much were your sales of/from the following** | | |
|  | **How much were your sales** (Amount in Ghana Cedis) | **HHMID** |
| 1. **Fishing** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c** |  |
| 1. **Hunting** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c** |  |
| 1. **Honey** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c** |  |
| 1. **Fruits, Berries, etc** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c** |  |
| 1. **Others** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c** |  |

# SECTION 7-NON-FARM HOUSEHOLD ENTERPRISE

***(RESPONDENT:*** *Head or Spouse, person who knows about business, employees, assets)*

### Part A: Basic Information

|  |  |
| --- | --- |
| **0. Point of verification:** In the last 12 months, has any member of this household (7 years and older) been involved in any non-farm employment, where the household member is not someone else’s employee?  1. Yes 2. No >>Next section |  |
| **1. How many businesses are owned by members in this household?**  1. Number | 1. No. \_\_\_\_\_\_\_ |

***Enumerator: Please ask these questions to the person who is responsible, or most knowledgeable, about each enterprise.***

|  |  |  |
| --- | --- | --- |
|  | **Enterprise 1** | **Enterprise 2** |
| **2. What is the name of the enterprise?** | Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **4. Please list the name of the person who is responsible(if this person is different from the one who owns it) for the enterprise and his/her household ID number**  **(Code 99 if outside the household)** | Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ID: \_\_\_\_\_\_\_\_\_ | Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ID: \_\_\_\_\_\_\_\_\_ |
| **5. Name and ID of household member interviewed** | Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    ID: \_\_\_\_\_\_\_\_\_\_\_ | Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    ID: \_\_\_\_\_\_\_\_\_\_\_ |
| **6. What is the main (principal) activity of this enterprise?**  **(See codebook for ISCO code and write 3 digits)** |  |  |
| **7. In which industry does it belong?**  **(See codebook for ISIC code and write 4 digits)** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **10. How many years, altogether, has this business been in operation?**  1. Years  2. Months | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ y  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_m | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ y  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_m |
| **17. What was the main source of capital in setting up this enterprise?**  1. Household savings – HS  2. Bank – BA  3. Remittances from abroad – RA  4. Proceeds from family farms – FF  5. Proceeds from family non-farm enterprise – NF  6. Income from family property(ies) -- IP  7. NGO support – NG  8. District assembly / town development support – DA  9. Church assistance – CA  10. Money lenders – ML  11. Relatives/ friends – RF  12. Other partners – OP  13. No capital required – NC  14. LEAP  15. Other (specify)–OT | 1. HS  2. BA  3. RA  4. FF  5. NF  6. IP  7. NG  8. DA  9. CA  10. ML  11. RF  12. OP  13. NC  14. LEAP  15. OT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 1. HS  2. BA  3. RA  4. FF  5. NF  6. IP  7. NG  8. DA  9. CA  10. ML  11. RF  12. OP  13. NC  14. LEAP  15. OT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  | **Enterprise 1** | **Enterprise 2** |
| --- | --- | --- |

|  |  |  |
| --- | --- | --- |
| **24a. What is the average monthly sales for this enterprise?**  **(Amount in Ghana Cedis)** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ c |

|  |  |  |
| --- | --- | --- |
| **27a. What is the average monthly costs for this enterprise?**  **(Amount in Ghana Cedis)** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ c |

|  |  |  |
| --- | --- | --- |
| **30. In the last month that this enterprise operated, what was the net profit (revenue minus costs)**  **(Amount in Ghana Cedis)** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ c |

### Part B: Information about Employees

***i. Information About All Employees: Please fill out for one enterprise at a time***

|  |  |  |
| --- | --- | --- |
|  | **Enterprise 1** | **Enterprise 2** |
| **1. How many people are currently working at this enterprise? Include HH members, apprentices, hired labor, AND the person responsible for the enterprise.**  1. Male  2. Female | 1. No. male \_\_\_\_\_\_\_\_\_\_  2. No. female \_\_\_\_\_\_\_\_\_\_ | 1. No. male \_\_\_\_\_\_\_\_\_\_  2. No. female \_\_\_\_\_\_\_\_\_\_ |
| **2. How many of these workers are paid?**  1. Male  2. Female | 1. No. male \_\_\_\_\_\_\_\_\_\_  2. No. female \_\_\_\_\_\_\_\_\_\_ | 1. No. male \_\_\_\_\_\_\_\_\_\_  2. No. female \_\_\_\_\_\_\_\_\_\_ |

# SECTION 8 - HOUSEHOLD HEALTH

Part A: Insurance*(Fill Out for all Household Members)*

| **Member ID** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **13** | **14** | **15** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **ID of Person Interviewed** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **1. Has [Name] ever registered or been covered with a health insurance scheme?**  **1.Yes**  **2.No >> Q3** | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. |
| **2. What type of health insurance scheme does [Name] have currently?**  ***(Circle all that apply in 1-5)***  1.National / District health insurance scheme (NHIS)  2.Health insurance through employer  3.Mutual health org. / community base health insurance  4.Other private purchase commercial health insurance  5. Other (specify)  6. None  **(Skip to 4 if member of NHIS)** | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. |
| **3. Why is [Name] not registered with (NHIS)?**  ***(Circle all that apply)***  1.Not heard of (NHIS)  2.Don’t understand the (NHIS)  3.Cannot afford premium  4.Do not need health insurance  5.NHIS does not cover health insurance **[Name]** needs  6.Other (specify)  **(Skip to Part D)** | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. | 1.  2.  3.  4.  5.  6. |
| **4. Who is currently paying [Name’s] health insurance cost?**  ***(Circle all that apply in 1-11)***  1.HH Member (Write ID ) 2.Relative / friend  3.Employer  4.SSNIT contribution  5.Exempted (as child)  6.Exempted (as elderly)  7.Exempted (as pregnant woman)  8.Exempted (as pensioner) 9.Exempted as indigent  (poor)  10.L.E.A.P Programme  11.Other (specify)  12..NA | 1.  2.  3.  4.  5.  6.  7.  8.  9.  10.  11.  12. | 1.  2.  3.  4.  5.  6.  7.  8.  9.  10.  11.  12. | 1.  2.  3.  4.  5.  6.  7.  8.  9.  10.  11.  12. | 1.  2.  3.  4.  5.  6.  7.  8.  9.  10.  11.  12. | 1.  2.  3.  4.  5.  6.  7.  8.  9.  10.  11.  12. | 1.  2.  3.  4.  5.  6.  7.  8.  9.  10.  11.  12. | 1.  2.  3.  4.  5.  6.  7.  8.  9.  10.  11.  12. | 1.  2.  3.  4.  5.  6.  7.  8.  9.  10.  11.  12. | 1.  2.  3.  4.  5.  6.  7.  8.  9.  10.  11.  12. | 1.  2.  3.  4.  5.  6.  7.  8.  9.  10.  11.  12. | 1.  2.  3.  4.  5.  6.  7.  8.  9.  10.  11.  12. | 1.  2.  3.  4.  5.  6.  7.  8.  9.  10.  11.  12. | 1.  2.  3.  4.  5.  6.  7.  8.  9.  10.  11.  12. | 1.  2.  3.  4.  5.  6.  7.  8.  9.  10.  11.  12. | 1.  2.  3.  4.  5.  6.  7.  8.  9.  10.  11.  12. |
| **5. Does [Name] hold a valid NHIS card?**  1.Yes (CARD seen) >>7  2.Yes (CARD NOT seen)  3.No | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. |
| **6. Why is [Name] not holding a valid NHIS card?**  1.Registered, (Not paid fully)  2.Registered, (card not received)  3.Registered, (waiting period)  4.Not renewed registration  5.Lost card  6.Other (specify) | 1  2.  3.  4.  5.  6. | 1  2.  3.  4.  5.  6. | 1  2.  3.  4.  5.  6. | 1  2.  3.  4.  5.  6. | 1  2.  3.  4.  5.  6. | 1  2.  3.  4.  5.  6. | 1  2.  3.  4.  5.  6. | 1  2.  3.  4.  5.  6. | 1  2.  3.  4.  5.  6. | 1  2.  3.  4.  5.  6. | 1  2.  3.  4.  5.  6. | 1  2.  3.  4.  5.  6. | 1  2.  3.  4.  5.  6. | 1  2.  3.  4.  5.  6. | 1  2.  3.  4.  5.  6. |
| **7. How much money has [Name] paid or is expected to pay as premium to the current insurance year?**  1.Amount paid (in Ghana Cedis)  2.Amount expected to pay (in Ghana Cedis) | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 11.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c |
| **8. How much money has [Name] paid or is expected to pay as registration fee to the current insurance?**  1.Amount paid (GH¢)  2.Amount expected to pay (GH¢) | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c | 1.  -------c  2.  -------c |
| **9. How many weeks did it take [Name] to obtain the NHIS card after the premium was paid in full?**  1.Expected number in weeks  2.Code 888 if not received yet | weeks | Weeks | Weeks | weeks | weeks | Weeks | weeks | weeks | weeks | weeks | weeks | weeks | weeks | weeks | Weeks |
| **10. Has [Name] ever benefited from the NHIS?**  1.Yes  2.No >>12 | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. |
| **11. How many times has [Name] used NHIS card during the last 12 months?**  1.Number of times |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **12. How many times has [Name’s] NHIS card been renewed since first registration?**  1.Number of times |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **13. Is [Name] holding a valid NHIS card for current year?**  1.Yes >>Part D  2.No  **(Cross-check with Question 5)** | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. | 1.  2. |
| **14. Why has [Name] not renewed current year’s NHIS card?**  1.The card has not expired  2.Has not been sick  3.Premium is expensive  4.Poor quality care for insurance card holders  5.Waiting time for card too long  6.Preferred services not covered  7.Use clinics / traditional practitioners who are not covered  8.Other (specify) | 1.  2.  3.  4.  5.  6.  7.  8. | 1.  2.  3.  4.  5.  6.  7.  8. | 1.  2.  3.  4.  5.  6.  7.  8. | 1.  2.  3.  4.  5.  6.  7.  8. | 1.  2.  3.  4.  5.  6.  7.  8. | 1.  2.  3.  4.  5.  6.  7.  8. | 1.  2.  3.  4.  5.  6.  7.  8. | 1.  2.  3.  4.  5.  6.  7.  8. | 1.  2.  3.  4.  5.  6.  7.  8. | 1.  2.  3.  4.  5.  6.  7.  8. | 1.  2.  3.  4.  5.  6.  7.  8. | 1.  2.  3.  4.  5.  6.  7.  8. | 1.  2.  3.  4.  5.  6.  7.  8. | 1.  2.  3.  4.  5.  6.  7.  8. | 1.  2.  3.  4.  5.  6.  7.  8. |

### Part D: Activities of Daily Living

(Fill Out for all Household Members 10 Years and Older)

| **Member ID** | **1** | **2** |  | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **13** | **14** | **15** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **ID of Person Interviewed** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **1. If [Name] had to carry a heavy load (e.g. size 34 Bucket of water) without any help for 20 meters, could he/she do it?**  1. Easily  2. With difficulty  3. Not at all | 1.  2.  3. | 1.  2.  3. |  | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. |
| **1.b Is [Name] able to bend, squat or kneel?**  1. Easily  2. With difficulty  3. Not at all | 1.  2.  3. | 1.  2.  3. |  | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. | 1.  2.  3. |

Part E: Miscellaneous Health (Fill Out For All Household Members 10 Years And Older)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Member ID** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **13** | **14** | **15** |
| **1. In general, how would you rate your health?**  1. Very healthy,  2. Somewhat healthy,  3. Somewhat unhealthy,  4. Unhealthy | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. |

Part F: Health in the Last 4 Weeks

*(Fill For All Household Members)*

| **Member ID** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **13** | **14** | **15** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **ID of Person Interviewed** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **1. During the last four weeks has [Name] suffered any illness or injury?**  1. Neither>>8  2. Illness  3. Injury  4. Both | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. | 1.  2.  3.  4. |
| **5. For how many days during the last 4 weeks has [Name] suffered from this condition?** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **6. During the last 2 weeks did [Name] have to stop the usual activities because of this condition?**  1. Yes  2. No (>>8) | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N |
| **7. For how many days did [Name] have to stop his/her usual activity?**  (1-14 days) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **8. During the last 4 weeks, has [Name] consulted any health care facility?**  1. Yes  2. No >>22 | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N |
| **9. On the most recent visit, who did [Name] consult?**  1. Doctor,  2. Dentist,  3. Nurse,  4. Medical Asst.,  5. Midwife,  6. Pharmacist,  7. Drug/Chemical seller, 8. Traditional Healer,  9. Trained Traditionanal Birth Attendant (TBA)  10. Untrained TBA,  11. Spiritualist,  12. Other (specify) | 1  2  3  4  5  6  7  8  9  10  11  12 | 1  2  3  4  5  6  7  8  9  10  11  12 | 1  2  3  4  5  6  7  8  9  10  11  12 | 1  2  3  4  5  6  7  8  9  10  11  12 | 1  2  3  4  5  6  7  8  9  10  11  12 | 1  2  3  4  5  6  7  8  9  10  11  12 | 1  2  3  4  5  6  7  8  9  10  11  12 | 1  2  3  4  5  6  7  8  9  10  11  12 | 1  2  3  4  5  6  7  8  9  10  11  12 | 1  2  3  4  5  6  7  8  9  10  11  12 | 1  2  3  4  5  6  7  8  9  10  11  12 | 1  2  3  4  5  6  7  8  9  10  11  12 | 1  2  3  4  5  6  7  8  9  10  11  12 | 1  2  3  4  5  6  7  8  9  10  11  12 | 1  2  3  4  5  6  7  8  9  10  11  12 |
| **10. What was the reason for the most recent visit?**  1. Illness,  2. Injury,  3. Follow-up,  4. Check-up,  5. Prenatal care,  6. Postnatal care,  7. Vaccination,  8. Other (specify) | 1  2  3  4  5  6  7  8 | 1  2  3  4  5  6  7  8 | 1  2  3  4  5  6  7  8 | 1  2  3  4  5  6  7  8 | 1  2  3  4  5  6  7  8 | 1  2  3  4  5  6  7  8 | 1  2  3  4  5  6  7  8 | 1  2  3  4  5  6  7  8 | 1  2  3  4  5  6  7  8 | 1  2  3  4  5  6  7  8 | 1  2  3  4  5  6  7  8 | 1  2  3  4  5  6  7  8 | 1  2  3  4  5  6  7  8 | 1  2  3  4  5  6  7  8 | 1  2  3  4  5  6  7  8 |
| **14. How much did [Name] pay for this consultation?**  (GH cedis) | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c |
| **15. How much did [Name] pay to travel and return?**  (GH cedis) | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c |
| **16. How much time did [Name] take to travel to and from the facility? (TRAVEL TIME)**  1. Hours  2. Minutes | -----------h  ----------m | -----------h  ----------m | -----------h  ----------m | -----------h  ----------m | -----------h  ----------m | -----------h  ----------m | -----------h  ----------m | ---------h  --------m | ---------h  --------m | ---------h  --------m | ---------h  --------m | ----------h  ---------m | ----------h  ---------m | ----------h  ---------m | -----------h  ----------m |
| **22. During the last 4 weeks did [Name] purchase any medicine or medical supplies?**  1. Yes,  2. No >> Part G | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N |
| **23. How much did [Name] pay altogether for these medicine/medical supplies?**  (Amount in Ghana cedis) | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c |
| **23a. During the last 4 weeks did [Name] pay for any lab test, xray,?**  1. Yes,  **2. No >>24** | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N |
| **23b. How much did [Name] pay altogether for the lab test, xray**  (Amount in Ghana cedis) | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c |
| **24. Total medical expenses over the last 4 weeks** (If cannot, give breakdown)  (Amount in Ghana cedis) | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c |

Part G: Health in Last 12 Months

*(Fill for All Household Members)*

| **Member ID** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **13** | **14** | **15** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **ID of Person Interviewed** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **1. For the last 12 months, was [Name] hospitalized for any illness/ injury?**  1. Yes,  2. No >> Next Section | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N | 1. Y  2. N |
| **2. If yes, how many days was NAME hospitalized?**  **1.number of days** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **3. What is the total cost of hospitalization?**  (Amount in Ghana cedis) | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c | -------c |

# SECTION 9E: COGNITIVE ABILITY, SOCIAL CAPITAL AND LIFE DISTRESS

*Respondent for this section should be the main respondent*

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Record PID for respondent** | |\_\_\_|\_\_\_|\_\_\_| |  |

|  | **Question** | | **Answers** | **Skip** |
| --- | --- | --- | --- | --- |
|  | **MEMORY** | |  |  |
| 1 | First, how would you rate your memory at present time? | | Excellent 1  Very good 2  Good 3  Fair 4  Poor 5 |  |
| 2 | In the next task, I am going to read a list of numbers. I would like you to repeat the list of numbers in the same order as I read them. The list of numbers will get longer as we go. Is this clear?  [**ENUMERATOR**: Read out list of numbers in first column. If respondent is able to repeat in correct order, go to next row. If not, read the list of numbers in the second column. If the respondent gets both lists wrong, code 3 and move on to Q3] | | **Coding categories:**  Correct in the first chance 1  Correct in the second chance 2  Incorrect in both chances 3 |  |
| a | 43 | 16 | 1 2 3 | IF 3 🡪 Q3 |
| b | 792 | 847 | 1 2 3 | IF 3 🡪 Q3 |
| c | 5941 | 7253 | 1 2 3 | IF 3 🡪 Q3 |
| d | 93872 | 75396 | 1 2 3 | IF 3 🡪 Q3 |
| e | 152649 | 216748 | 1 2 3 | IF 3 🡪 Q3 |
| f | 3745621 | 4925316 | 1 2 3 | IF 3 🡪 Q3 |
| g | 82973546 | 69174253 | 1 2 3 | IF 3 🡪 Q3 |
| h | 246937185 | 371625948 | 1 2 3 | IF 3 🡪 Q3 |
|  | **SOCIAL CAPITAL** | |  |  |
| 3 | About how many close friends do you have these days? These are people you feel at ease with, can talk to about private matters, or call on for help. | | Answer |\_\_\_|\_\_\_| |  |
| 4 | If you suddenly needed a small amount of money [RURAL: enough to pay for expenses for your household for one week; URBAN: equal to about one week’s wages], how many people beyond your immediate household could you turn to who would be willing to provide this money? | | No one 1  One or two people 2  Three or four people 3  Five or more people 4 | IF 1🡪 Q7 |
| 5 | Of those people, how many do you think are currently *able* to provide this money? | | No one 1  One or two people 2  Three or four people 3  Five or more people 4 | IF 1🡪 Q7 |
| 6 | Are most of these people of similar/higher/lower economic status? | | Similar 1  Higher 2  Lower 3 |  |
| 7 | If you suddenly had to go away for a day or two, could you count on your neighbours to take care of your children? | | Definitely 1  Probably 2  Probably not 3  Definitely not 4 |  |
| 8 | If you suddenly faced a long-term emergency such as the death of a breadwinner or [RURAL: harvest failure; URBAN: job loss], how many people beyond your immediate household could you turn to who would be willing to assist you? | | No one 1  One or two people 2  Three or four people 3  Five or more people 4 | 🡪 Q10 |
| 9 | Of those people, how many do you think are currently *able* to assist you? | | No one 1  One or two people 2  Three or four people 3  Five or more people 4 |  |
| 10 | In the past 12 months, how many people with a personal problem have turned to you for assistance? | | Answer |\_\_\_|\_\_\_| | IF 0 🡪 Q11a |
| 11 | Are most of these people of similar/higher/lower economic status? | | Similar 1  Higher 2  Lower 3 |  |
|  | **LIFE SATISFACTION** | |  |  |
| 11a | Please imagine a ladder, with steps numbered from 0 at the bottom to 10 at the top. The top of the ladder represents the best possible life for you (10) and the bottom of the ladder represents the worst possible life for you (0). On which step of the ladder would you say you personally feel you stand at this time?  *Enumerator: Enter the number.* | | \_\_\_\_\_\_\_\_\_\_ |  |
|  |  | |  |  |
|  |  | |  |  |
|  |  | |  |  |
|  | **FUTURE OUTLOOK** | |  |  |
| 12 | Do you think your life will be better in […] from now? | |  |  |
|  | A. 1 year | | Yes 1  No 2 |  |
|  | B. 3 years | | Yes 1  No 2 |  |
|  | C. 5 years | | Yes 1  No 2 |  |
|  | **LIFE DISTRESS INDEX** | |  |  |
| 13 | Now I want to ask you a few questions about how distressed you CURRENTLY feel in certain areas of your life. The larger the bar, the more distressed you feel about this area. [Show card with bars].  Please indicate how distressed you currently feel about…. | | No distress 1  Little distress 2  Some distress 3  A lot of distress 4  Very distressed 5  Not applicable 9 |  |
|  | A. Relationship to children | | 1 2 3 4 5 9 |  |
|  | B. Relationship to other relatives | | 1 2 3 4 5 9 |  |
|  | C. Financial situation of your household | | 1 2 3 4 5 9 |  |
|  | D. Employment for you or your household members | | 1 2 3 4 5 9 |  |
|  | E. Education of children in the household | | 1 2 3 4 5 9 |  |
|  | F. Social life (relationship to friends and other community members) | | 1 2 3 4 5 9 |  |
|  | G. Physical health of you or your household members | | 1 2 3 4 5 9 |  |
|  | H. Safety/security of you or your household members | | 1 2 3 4 5 9 |  |
|  | I. Expectations for the future | | 1 2 3 4 5 9 |  |
|  | J. Alcohol use in the community | | 1 2 3 4 5 9 |  |

**CARD WITH BARS:**



# SECTION 10A - OPERATIONAL PERFORMANCE

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | For this section, we would like to talk to the most knowledgeable person about the LEAP-Cash Transfer Programme *(for example, the primary caregiver identified in section B)*   |  |  |  | | --- | --- | --- | | N |  |  |   NEW ID CODE of most knowledgeable household member about LEAP Cash Transfer Programme | | | |
|  | **Targeting / Selection** |  | |  | |
| **1. Are you aware of the LEAP cash transfer programme that is operating in this community?** | | | **1 = Yes**  **2 = No >>SECTION 11- Household Food Security Module**  **Interviewer:** If ‘NO’, explain what the LEAP Cash Transfer Programme is to double-check respondent’s awareness. | |  |
| **2. Has your household EVER received payments from the LEAP cash transfer programme?** | | | 1 = Yes >>Q4  2 = No | |  |
| **3. Who do you think are eligible to receive the transfer?**  **(Indicate *1=Yes; 2=No for each criteria*)**   1. **individuals taking care of many orphans/children** 2. **sick individuals** 3. **widowed individuals** 4. **individuals not able to work** 5. **handicapped individuals** 6. **old individuals** 7. **very poor individuals** 8. **I do not know** 9. **Other (specify)**   **>> NEXT SECTION-- SECTION 11- Household Food Security Module** | | | **individuals taking care of many orphans/children** | | \_\_\_\_\_ |
| **sick individuals** | | \_\_\_\_\_ |
| **widowed indicviduals** | | \_\_\_\_\_ |
| **individuals not able to work** | | \_\_\_\_\_ |
| **handicapped individuals** | | \_\_\_\_\_ |
| **old individuals** | | \_\_\_\_\_ |
| **very poor individuals** | | \_\_\_\_\_ |
| **I do not know** | | \_\_\_\_\_ |
| **Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | \_\_\_\_\_ |
|  | | |  | |  |
| **4. Why do you think you were selected to receive the transfer? (*1=Yes; 2=No*)**   1. **I take care of many orpans/children** 2. **I am sick** 3. **I am widowed** 4. **I am not able to work** 5. **I am handicapped** 6. **I am old** 7. **I am very poor** 8. **I do not know**   **Other (specify)** | | | **I take care of many orpans/children** | | \_\_\_\_\_ |
| **I am sick** | | \_\_\_\_\_ |
| **I am widowed** | | \_\_\_\_\_ |
| **I am not able to work** | | \_\_\_\_\_ |
| **I am handicapped** | | \_\_\_\_\_ |
| **I am old** | | \_\_\_\_\_ |
| **I am very poor** | | \_\_\_\_\_ |
| **I do not know** | | \_\_\_\_\_ |
| **Other (specify)** | | \_\_\_\_\_ |
| **5. Do you think that the selection process for the LEAP program is fair?** | | | 1=Strongly Agree 4=Disagree  2=Agree 5=Strongly disagree  3=Neither agree nor disagree | |  |
| **6. Do you think that the eligibility criteria for the LEAP program are clear?** | | | 1=Strongly Agree 4=Disagree  2=Agree 5=Strongly disagree  3=Neither agree nor disagree | |  |
| **7. Are you or any member of the household currently a beneficiary of the leap program?|\_\_\_|** | | | **1 = Yes**  **2 = No >>Q11** | | |
| **7a. Ask to see enrolment ID CARD, [Form 1] (Form 1 seen? 1=Yes; 2=No)** | | | **(Form 1 seen? 1=Yes; 2=No)** | | |
| **7b. Who is/are the designated beneficiary(ies)? [Note beneficiaries’ Member ID] (list all Ids if multiple)** | | | **Mem ID:** | | |
| **7c. Who usually collects the payment from the payment point? [Note Member ID of person. If not member of the household, enter ‘99’]** | | | **Mem ID:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (HHMID) (99 IF NOT A HOUSEHLD MEMBER)** | | |
| **8. How many eligible beneficiaries are in this household?** | | | |  | | --- | |  |   NUMBER | | |
| **9. Interviewer: From the household’s LEAP Programme ID card, write the unique number on the card. (If the respondent is a beneficiary write his/her unique ID, if not write that of the oldest beneficiary)**  **If programme card or receipt NOT available write 9 in all the boxes (15 boxes)’** | | | Write the LEAP UNIQUE ID NUMBER (from ID Card)   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  |  |  |  |     LEAP Unique ID Number | | |
| **10. Interviewer: Refer to the household roster in Section 1A1 OR S1A2, What is the HH member ID of the main caregiver specified on the Programme card?**  *If the main caregiver specified on Programme card is* **NO LONGER** *part of this household, please write the OLD ROSTER ID in the space provided. Refer to the ‘Household Identifier Form’.* | | | |  |  |  |  | | --- | --- | --- | --- | | **HHMID** |  |  |  |     **>>**Q12 | | |
| **11. Why are you NOT still receiving payments from the LEAP programme anymore?** | | | 1 = Youngest child in household is over 17 years old  2 = LEAP(s) moved out of household/*LEAP(s)*  3 = Missed the collection of 3 consecutive payments  4 = Voluntarily left the programme: didn’t need it  5 = Voluntarily left the programme: programme did not work properly  6 = Voluntarily left the programme: too many conditions  7 = Enrolled in another cash transfer programme  8 = Did not follow rules (conditions)  9 = Other, specify  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  98 = Don’t know/ | | |

|  |  |  |
| --- | --- | --- |
| **Payment systems and operations/** |  |  |
| **12. When was the last time the household received a LEAP payment? [list month and year numerically] (mm|yyyy) |\_\_\_\_|\_\_\_\_| |\_\_\_\_|\_\_\_\_|\_\_\_\_|\_\_\_\_|**  ***Enter “9999”in the yyyy boxes if the respondent does not know*** | |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |   MONTH  YEAR |  |
| **13. How much did you receive? *Enter “9999” if the respondent does not know*** | |  |  |  |  | | --- | --- | --- | --- | |  |  |  |  |   Amount in Ghana Cedi |  |
| **14. When do you expect to receive the next payment?** | 1=in next two months 4=greater than twelve months  2=in next six months 5=Never  3=in next twelve months | |  |  | | --- | --- | | 1 | 2 | | 3 | 4 | | 5 |  | |
| **15. How long in the future do you expect to continue receiving this money?** | 1=6 months 4=5 years  2=1 year 5=longer/for the rest of life]  3=2 years | |  |  | | --- | --- | | 1 | 2 | | 3 | 4 | | 5 |  | |
| **19. In general, how long does it take you (or your respondent) to travel from your home to the Payment point and back again?**  **Interviewer: 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/ Minutes |  |
| **20. What will be an acceptable time for you or your representative to travel from your home to the payment point and back?** | |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |   Hours/ Minutes |  |
| **21. For your last payment, how were you informed that the payment was ready to be collected at the Payment point?** | **Informed in public (in front of other community members ) by:**  1 = community leader (non government / elder)  2 = government representative  3 = another beneficiary  4 = other community member/  5 = family member  6 = payment point staff/  7 = LOC member  **Informed in private by:**  8 = community leader (non government / elder)  9 = (government representative)  10 = another beneficiary  11 = other community member  12 = family member  13 = payment point staff  14 = LOC member  15 = Saw others going to collect the payment  16 = Other (specify)\_\_  17=Mobile phone |  |
| **22. In the future how will you prefer to be informed that the payment is ready?** | 1 = community leader (non government / elder)  2 = government representative  3 = another beneficiary  4 = other community member/  5 = family member  6 = payment point staff/  7 = LOC member  8= Mobile phone  9 = Other Specify |  |
| **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 >>28  2 = No |  |
| **27. Will you be willing to designate a representative to collect the payment for you on your behalf?** | 1 = Yes >>30  2 = No>>30 |  |
| **28. What is your relationship to the representative you have identified for the LEAP 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 your representative) 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 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  98 = 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*?***  **Interviewer: This does not include travel costs.** | 1 = Yes  2 = No  98 = Can’t say |  |
| **32. Has anyone at the payment point ever asked you for money (gift) before or after payment of the Leap transfer?** | 1 = Yes if Q31 = No/ Can’t say >>Q34  2 = No |  |
| **33. For the LAST time you had to pay any such moneys (gifts) (use local expression) to the payment point staff, how much did you have to pay?** | |  |  |  |  | | --- | --- | --- | --- | |  |  |  |  |   Amount in Ghana Cedi |  |
| **34.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?**  **Interviewer: This does not include the alternative recipient / representative or Payment point staff.** | 1 = *Yes*  2 = No  98 = Can’t say |  |
| **35. Has anyone in the community ever asked you for money (gift) before or after payment of the Leap transfer?** | 1 = Yes if Q34=No /Can’t say >> 37  2 = No |  |
| **36. For the LAST time you had to pay such monies (use local expression) to somebody in the community , how much did you have to pay?** | |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  |  |  |  |   Amount in Ghana Cedis |  |
| **37. In general, do you feel safe collecting your money from the Payment point and taking it back home*?*** | 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  98 = Don’t Know |  |
| **39. In general, are you happy with the way you are treated by the LEAP programme representatives (eg. LOC members, DCOs)?** | 1 = Yes  2 = No  98 = Don’t Know |  |
| **40. Do other people in the community know that you are receiving payments from the LEAP cash transfer programme?** | 1 = Yes  2 = No  98 = Don’t know |  |
| **41. Is / would it be a problem for you if others in the community know that you are receiving payments from the LEAP cash transfer programme*?*** | 1 = Yes  2 = No  98 = Don’t know |  |
| **42. Are you happy with the current payment method?** | 1 = Yes >>51  2 = No |  |
| **43. What would you suggest will be an appropriate payment method?** | 1=Rural banks 4=None  2=Commercial banks 5=Other specify..........................................  3=Mobile banks 6=Mobile money |  |

|  |  |  |
| --- | --- | --- |
| **Use of the cash transfer** |  |  |
| **51. In this household, who generally decides how the payment from the LEAP programme is used?** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name of Main Decision Maker   |  |  |  | | --- | --- | --- | | **HHMID** |  |  |   New OR Old HHM ID of Main Decision Maker | |
| **52. Interviewer: Refer to the name of main decision maker provided in** Q51.  **In general, who does [NAME] consult with when deciding how to use the payment from the LEAP programme?** | 1 = Alone  2 = In consultation with other adult family members  3 = In consultation with children  4 = In consultation with ALL family members  5 = In consultation with someone else in the community  98 = Don’t know | |
| **53. Is the payment from the LEAP programme kept separate from the rest of the household’s sources of income?** | 1 = Yes  2 = No  98 = Don’t know | |
| **54. In general, can you tell me who in your household benefits from the payments of the LEAP cash transfer programme?** | 1 = All household members  2 = Adult(s) only  3 = Children only (OVCs and non-OVCs)  4 = Ophans and Vulnerable Children ( OVCs ) only  5 = Other, specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **55. In general, list the main things that the payment from the LEAP programme is used for. List up to 3.**  **Interviewer: Circle all that apply */* Do NOT prompt or give them examples for them to mention** | A = Food and nutrition  B = Formal government education (fees, textbooks, uniforms etc.)  C = Other education (nursery, other religious school)/  D = Health care  E = Shelter / Accommodation / Rent  F = Clothing / Shoes (does not include school uniforms)  H = Investment/small business  I = Formal social occasions such as Weddings / Funerals  J = Savings/Susu  K = Other spending, specify *\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_  98 = Don’t Know / Can’t say/ | |  |  | | --- | --- | | A | B | | C | D | | E | F | | G | H | | I | J | | K | 98 | |

# SECTION 11 - HOUSEHOLD FOOD SECURITY MODULE

(*THESE QUESTIONS SHOULD BE ASKED AT THE HOUSEHOLD LEVEL*)

1. Number of days in the last 7 days for eating different types of food
2. Food situation in your household in the last 12 months

**Question 1: (i)** *I would like to ask you about all the different foods that your household members have eaten in the* ***last 7 days****. Could you please tell me* ***how many days*** *in the last week your household has eaten the following foods?*

|  |  |
| --- | --- |
| **Food Item** | **Days eaten in last week (0-7 days)** |
| 1. Maize | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. Millet | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| 1. Rice | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. Bread/wheat | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. Roots, Tubers and Suckers (cassava, plantain, other) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. Groundnuts & Pulses (beans, other nuts) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. Fish (eaten as a main food) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. Fish powder, small fish (used for flavor only, Magi) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. Red meat (sheep/goat/beef) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. White meat (poultry) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. Vegetable oil, butter, shea butter, fats, palm oil | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. Eggs | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. Milk and dairy products (main food) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. Milk in tea in small amounts | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. Vegetables (including green leaves) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. Fruits | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. Sweets, sugar, honey | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**II. WHICH OF THESE STATEMENTS BEST DESCRIBES THE FOOD SITUATION IN YOUR HOUSEHOLD IN THE LAST 12 MONTHS?**

|  |  |  |
| --- | --- | --- |
|  |  | |
| **2. In the last 12 months, did you or other adults in your household lose weight because you didn't have enough money for food?**  [1] Yes  [2] No  [3] DK or Refused  **3a. In the last 12 months, did you or other adults in your household ever not eat for a whole day because there wasn't enough money for food?**  [1] Yes  [2] No (>> 4)  [3] DK or Refused (>> 4)  **3b. [IF YES ABOVE, ASK] How often did this happen?**  [1] Almost every month  [2] Some months but not every month  [3] Only 1 or 2 months  [4] DK or Refused  ***The next questions are about children living in the household who are under 18 years old.***  **4. In the last 12 months, since (current month) of last year, did you ever cut the size of (your child's/any of the children's) meals because there wasn't enough money for food?**  [1] Yes  [ 2] No  [3] DK or Refused | | **5. In the last 12 months, did (CHILD’S NAME/any of the children) ever skip meals because there wasn't enough money for food?**  [1] Yes  [2] No >>7  [3] DK or Refused >>7  **6a. [IF YES ABOVE ASK] How often did this happen?**  [1] Almost every month  [2] Some months but not every month  [3] Only 1 or 2 months  [4] DK or Refused  **7. In the last 12 months, (was your child/ were the children) ever hungry but you just couldn't afford more food?**  [1] Yes  [2] No  [3] DK or Refused  **8. In the last 12 months, did (your child/any of the children) ever not eat for a whole day because there wasn't enough money for food?**  [1] Yes  [2] No  [3] DK or Refused |

# SECTION 12 - CONSUMPTION MODULE

Part A. Food Items Consumed

Part B. Clothing and Foodwear

**Part [C. Expenditure on Other Items in Last 12 months](C:\\Users\\ex\\Documents\\ALL FOLDERS\\LEAP\\LEAP\\leap questionaire a&b.doc)**

**[Part D. Fuel and Other Lubricants](C:\\Users\\ex\\Documents\\ALL FOLDERS\\LEAP\\LEAP\\leap questionaire a&b.doc)**

a. Own Produced (quantity, GH¢)

b. Purchased (quantity, GH¢)

c. Gifts Received (quantity, GH¢)

d. Gifts Given (quantity, GH¢)

e. Codes for unit given by respondent

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **UNIT** | **CODE** | **UNIT** | **CODE** | **UNIT** | **CODE** |
| American tin | 2 | Sheet | 22 | Sachet | 42 |
| Barrel | 3 | Stick | 23 | Packet(pack) | 43 |
| Basket | 4 | Tonne | 24 | Miles | 44 |
| Beer bottle | 5 | Tree | 25 | Teacup | 45 |
| Bowl | 6 | Tubers | 26 | Cubes | 46 |
| Box | 7 | Balls | 27 | Kilometers | 47 |
| Bunch | 8 | Bar | 28 | Tot | 48 |
| Bundle | 9 | Bucket | 29 | Wrap/Tied pieces | 49 |
| Fanta/Coke bottle | 10 | Crate | 30 | Carton | 50 |
| Fingers | 11 | Dozen | 31 | Container | 51 |
| Fruits | 12 | Loaf | 32 | Heap | 52 |
| Gallon | 13 | Pair | 33 | Pan | 53 |
| Kilogram | 14 | Pieces | 34 | Plates/cups | 54 |
| Litre | 15 | Pots | 35 | Bag | 55 |
| Log | 16 | Set | 36 | Acre | 56 |
| Margarine tin | 17 | Singles | 37 | Rope | 57 |
| Maxi bag (100kg) | 18 | Yard/Meter | 38 | Bail | 58 |
| Mini bag (50kg) | 19 | Calabash | 39 | Can | 59 |
| Nut | 20 | Milk Tin | 40 | Slice | 60 |
| Pounds | 21 | Tin | 41 | Small Tin | 61 |
|  |  |  |  | Spoon | 62 |

Part A: Food Items Consumed

*(PLEASE ASK THE MOST KNOWLEDGEABLE HOUSEHOLD MEMBER ABOUT OWN PRODUCED FOOD ITEMS, FOOD ITEMS PURCHASED, GIFT RECEIVED AND GIFTS GIVEN OUT BY THE HOUSEHOLD DURING THE LAST 30 DAYS)*

S12a\_0: Did the household consume this item?

| **Item** | **a) own produce (GH¢) Last 30 Days** | | **b) Purchased (GH¢)**  **Last 30 Days** | **c) Gift Received (GH¢)**  **Last 30 Days** | | **d) Gift Given (GH¢) Last 30 Days** | **e) Unit (see Codes above)** | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Cereals**  **1. Guinea corn / sorghum** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | |
| **2. Maize** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | |
| **3. Millet** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | |
| **4. Rice – Local** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | |
| **5. Rice Imported** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | |
| **6. Other cereals** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | |
| **Pulses and Nuts**  **7. Cowpea Beans** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | |
| **8. Soya Beans** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | |
| **9. Other Beans** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | |
| **10. Groundnuts** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | |
| **10a. Groundnuts Paste** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | |
| **11. Palm nuts** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | |
| **12. Cola nuts** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | |
| **13. Other pulses and nuts** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | |
| **14. Bread** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | |
| **15. Biscuits** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | |
| **16. Flour (wheat)** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | |
| **17. Maize ground / corn dough** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | |
| **18. Kenkey / banku (without sauce)** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | |
| **19. Baby food (cerelac, unimix,etc)** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | |
| **Cooking oil**  **20. Coconut oil** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | |
| **21. Groundnut oil** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | |
| **22. Palm kernel oil** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **23. Shea butter** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **24. Palm oil** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **25. Margarine / Butter** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **26. Other vegetable oils included** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **Spices / Condiments**  **27. Black pepper** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **28. Salt** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **29. Ginger** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **30. Other Condiments/Spices (Royco etc)** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **Milk / milk products**  **31. Milk (fresh)**  **a) Months in Season** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **32. Milk (powder)** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **33. Baby milk** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **34. Tinned milk** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **35. Other milk products incl. Cheese** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **Eggs and Poultry**  **36. Eggs** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **37. Chicken/Guinea fowl** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **38. Game birds** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **Meat**  **39. Corned beaf** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **40. Pork** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **41. Beef** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **42. Goat meat** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **43. Mutton** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **44. Bush meat / wild game** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **45. Fish** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **46. Canned / Tin Fish** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **Fruits**  **47. Coconut** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **48. Banana** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **49. Orange / tangerine** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **50. Pineapple** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **51. Mango** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **52. Avocado pear** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **53. Water melon** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | | | |
| **54. Pawpaw** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | | | |
| **55. Apple** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | | | |
| **56. Sugarcane** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | | | |
| **Vegetables**    **57. Cocoyam leaves (Kontomire)** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | | | |
| **58. Garden eggs** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | | | |
| **59. Okro (Fresh or Dried)** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | | | |
| **60. Carrots** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **61. Cabbage** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **62. Pepper (fresh or dried)** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **63. Onions (large / small)** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **64. Tomatoes (fresh)** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **65. Tomato puree (canned)** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | |
| **66. Other vegetables** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | |
| **Starchy Staples**    **67. Cassava** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | |
| **68. Cocoyam** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | |
| **69. Plantain** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | |
| **70. Yam** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **71. Cassava dough** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **72. Gari** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **73. Other starchy staples** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **Confectionery**  **74. Sugar (cube, granulated)** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | e) \_\_\_\_\_\_\_ | | | | |
| **75. Honey** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **76. Ice cream, ice lollies, etc.** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **77. Chocolate** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **78. Other confectionaries** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **Beverages**  **79. Coffee, tea cocoa, etc** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **80. Bottled water, soft drink & Juices** | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **81. Alcoholic beverages** | | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **82. Tobacco** | | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **83. Other beverages** | | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **84. Cooked meals (as wages)** | | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |
| **85. Restaurants, cafés, Canteens, Hotels, etc.** | | a) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | b.) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | c) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | d) \_\_\_\_ qty  \_\_\_\_\_\_\_\_\_c | | e) \_\_\_\_\_\_\_ | |

Part B. Clothing and Footwear

*PLEASE ASK THE MOST KNOWLEDGEABLE HOUSEHOLD MEMBER ABOUT THE ANNUAL PURCHASES IN THE LAST 12 MONTHS*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Item** | **Expenditure for children under 16 years (GHC)** | **Expenditure for elderly over 60 years (GH¢))** | **Expenditure for male adults ages 16-60 years (GH¢))** | **Expenditure for female adults ages 16-60 years (GH¢))** | **Total expenditure in the last 12 months (GH¢))** |
| **1. Suits** | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c |
| **2. Smocks** | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c |
| **3. Cloth (eg. Kente). [This does not include cloth for garment]** | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c |
| **4. Trousers** | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c |
| **5. Shirts/Jackets** | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c |
| **6. Jeans** | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c |
| **7. Underwear** | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c |
| **8. Cloth for garments. [ie. Cloth and other materials]** | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c |
| **9. Other garments and clothing** | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c |
| **10. Footwear** | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c |
| 11. Tailoring, laundry / cleaning, clothing repair | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_c |

Part C. Expenditure On Other Items In The Last 12 Months

*PLEASE ASK THE MOST KNOWLEDGEABLE HOUSEHOLD MEMBER ABOUT EXPENDITURE ON OTHER ITEMS IN THE LAST 12 MONTHS*

| **Item** | **Total expenditure in the last 12 months (for entire household) (GH¢)** |
| --- | --- |
| **1. Regular remittances / gifts** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **2. Gifts / support to help at the time of difficulty** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **3. Cultural festivals (donations) [Homowo, Odwira, etc]** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **4.Church donations** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **5. Funerals (donations)** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **6. Payment for rent** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **7. Owner occupy housing rent (estimate)** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **8. Plumbing, electrical, and carpentry services (labour cost)** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **9. Sewerage removal, refuse disposal, expenditure on public toilets** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **10. Water (pipe-borne, metered)** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **10a. Water (well)** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
| **10b. Water (borehole)** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
| **11. Water (tanker services)** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **12. Cement (for minor repairs of the dwelling)** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **13. Hired labour for dwelling repairs** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **14. Repairs to furniture and floor coverings (parts)** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **15. Repairs to household appliances (parts)** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **16. Car and truck repairs, maintenance, and other fees** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **17. Lawn boys / gardeners** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **18. Security guards** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **19. House boys / house maids** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **20. House keepers / caretakers** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **21. Baby sitters, day care attendants, nannies, etc** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **22. Barbers and beauty shops** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **23. Soaps, bleaches, disinfectants, cleaners, and toilet papers** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **24. Matches and candles** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **25. Insecticides - coils and sprays** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **26. Medicine (pain killers, antibiotics, anti malaria medicines, condoms, tablets, syrups, etc)** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **27. Newspapers, magazines, and books** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **28. Goods for personal care (toothlaste, razor blades, combs, scent sprays, cosmetics, etc)** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **29. Postal, telephone, telegram, fax, internet / email, etc., services and charges** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **30. Pets, pet food, veterinary services** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **31. Gardening expenses (plants, pots, fertilizers, compost, etc).** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|
| **32. Entertainment** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
|

### Part D: Fuel Used in the last 12 months

*(PLEASE ASK THE MOST KNOWLEDGEABLE HOUSEHOLD MEMBER ABOUT EXPENDITURE ON OTHER ITEMS IN THE LAST 12 MONTHS)*

| **Item** | **Total expenditure in the last 12 months (for entire household) (GH¢))** |
| --- | --- |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Type of Fuel** | **Number of Months Used**  **(write in number)** | **Average Value per Month**  **(GH¢))** | **Home Produced/Collected**  **(GH¢))** | **Purchased**  **(GH¢))** |
| **. Electricity** |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
| **2. Gas for household use** |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
| **3. Kerosene** |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
| **4. Charcoal** |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
| **5. Firewood and other solid fuels** |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
| **6. Petrol** |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
| **7. Diesel** |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
| **8. Dung cake** |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
| **9. Crop byproducts / waste** |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c |
| **10. Rubbish / plastic** |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c | \_\_\_\_\_\_\_\_\_\_\_\_\_\_c |

# SECTION 13 - HOUSING CHARACTERISTICS

### Section 13A: Housing Characteristics I

|  |  |
| --- | --- |
| **RENT**  Q1.Do you pay rent for this dwelling?  1………………..Yes  2…………………No >>8 | Q2. How much does the household pay in cash  towards the rent?  Amount in **GH¢**  **GH¢**  Time Unit see codes  **TIME UNITS**  1………………..Daily 0………………..No Applicable  2………………..Weekly 6………………..Yearly  3………………..Monthly 5……………..…Half Yearly  4………………..Quarterly |
| Q8. How much does the household spend for construction or repair costs and painting in the last 12 months on this dwelling?  Amount in **GH¢** | **UTILITIES**  Q9. What is the main source of water supply for this household?  DRINKING GENERAL USE    **Codes for Q9**  01………………Indoor plumbing 09………….…Borehole  02………………Inside stand pipe 10………….…Protected well  03………………Water truck/tanker service 11.…………….Unprotected well  04……………...Water vendor 12……………..River/Stream  05………….Pipe in neighboring household 13…………..Rain water/spring  06……………Private outside standpipe 14……..Dugout pong/lake/dam  07……………………..Public Stand pipe 15..………..Other specify  08……………………..Sachet/bottled water |
|  |  |
| Q10. How far is this source of water from your dwelling?  NUMBER DISTANCE UNIT  DRINKING  GENERAL USE NUMBER DISTANCE UNIT  (Enter 888 if water source is in the house/compound) | Q11. How long does it take to go for drinking water and come back?  Number of minutes  Code 888 for water on premise  Code 999 for don’t know |
| Q14. Do you treat your water in any way to make it safer to drink?  1…………Yes  2………..No >>22  3………..Don’t know | Q15. What do you usually do to the water to make it safer to drink? (Record all that applies)  1.Boil  2. Add bleach/chlorine 6. Let it stand and settle  3. Strain it through a cloth 7. Other (specify)  4. Use a water filter(ceramics, sand, composite ect) 8. Don’t know   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |   5. Solar disinfestations |
| Q22. What is the main source of lighting for your dwelling?  1…………………….Electricity  2…………………….Kerosene  3…………………… Gas lamp  4……………Candles/Touches (flashlights)  5……………………Solar energy  6……………………Generator  7……………………No light  8……………………Other | Q24. What is the main fuel used by the household for cooking?  **1…………………….None, no cooking**  **2……………….……Wood**  **3……………….…..Charcoal**  **4……………….…..Gas**  **5……………….…..Electricity**  **6……………….…..Kerosene**  **7…………………..Crop residue/saw dust**  **8……………………Animal waste**  **9……………………Other** |
| Q25. How does your household dispose off refuse?  1…………………Collected  2…………………Public Dump  3…………………Dumped elsewhere  4…………………Burned by household  5………………..Buried by household  6………………..Other specify | Q27. The last time (name of youngest child under 5 years) passed stools, what was done to dispose off the stools?  1……...Child used toilet latrines 5.………Left it in the open  2……...Put/rinsed into drain or ditch 6. ……..…Other , specify  3……...Thrown into garbage 7 ………………Don’t know  4………….Buried 8. No child under 5 years in HH |
| Q28. What type of toilet is used by your household?  1…………Flush Toilet >>30 6…………Toilet in another house  2………...Pit latrine >>30 7……..No toilet facility (bush, beach) >>30  3…………KVIP >>30 8…………other , specify >>30  4…………Pan/bucket >>30  5…………Public toilet(flush, bucket,KVIP) | Q29. How much does your household pay for the use of the toilet facility?  Amount in **GH¢**    **GH¢**  Time Unit see codes |
| Q30. What is the main construction material used for the outer wall of the main building?  **1…………………….Mud/mud bricks 8……………………….Thatch**  **2…………………….Wood/Bamboo 9…………….Cardboard**  **3…………………Metal sheet/slate/asbestos 10…………….Other , specify**  **4……………………..Stone 11.......mudbricks with cement 5……………………..Burnt bricks plastering**  **6…………………….Cement/sandcrete blocks**  **7……………………..Landcrete** | Q31. What is the main construction material used for the floor?  1……………Earth/Mud/Mudbricks 6…...……..Vinyl tiles  2…………….Wood 7…………..Ceramic/marble tiles  3…………….stone 8..…………Terrazzo  4…………….Cement/concrete 9……..……Other ,specify  5…………….Burnt bricks |
| Q32. What is the main material used for the roof?  1………Palm leaves/Raffia/Thatch 6…….Roofing tiles  2………Wood 7…….Mudbricks/Earth  3…….. Corrugated iron sheet 8…….Bamboo  4…….. Cement/Concrete 9……Other specify  5………Asbestos/slate | 33. Does the household have access to the following?  1………..Yes 2………..No   |  |  | | --- | --- | | Fixed line telephone |  | | Mobile phone |  | | Personal computer |  | | Internet |  | | E-commerce |  | | Paid Cable Network (M-NET) |  | |

### Section 13B : Housing Characteristics II

To be asked to the household head. (Some of these questions can be filled by the interviewer)

|  |  |
| --- | --- |
| Q1. In what type of dwelling does the household live?  1…Separate house/bungalow  2………….…..Semi-detached house  3…………..….Flat/Apartment  4……………...Rooms/compound house  5……………...Rooms-Other types  6……….……..Several huts/buildings same compound  7………………Several huts/buildings different compound  8………………Tent/ improved home  9………………Other Specify | 6. What is the condition of the house in which the household is living?    1…………Good  2………..Livable  3………..Badly damaged |
| Q2. How many rooms does the household occupy?  (Count living rooms, bed room, dining rooms but not bathroom, toilet and kitchen) | Q7. How are the surroundings of the house?    1…………Clean  2…………Average  3…………Dirty |
| Q3.Do other households share this building with you?  1………………Yes  2……..……….No | Q8.How many bedrooms does the household have?  NUMBER |
| Q4.What is your present occupancy status?  1……………………Owning  2…………………..Renting  3…………………..Rent-free  4………………….Perching | Q9. Is there a room used exclusively for cooking?    1………Yes  2……….No >>12 |
|  | Q10. Is there a window in the room where cooking is done?    1………Yes  2……..No |
| Q11. Is there a chimney/smoke outlet in the cooking place?  1………………Yes  2……..……….No | Q23. Is there any open sewer/drain in and around the house?  1…………..…..Yes  2………………..No  3………………..Drains are covered |
| Q12. Is cooking done outside in all seasons (rainy and dry season)?  1………………Yes>>14  2……..……….No | Q24. Is there garbage (trash) in and around the house?  1…………..…..Yes  2………………..No |
| Q13. If not all seasons, in which season is cooking done outside?  1……...Rainy season  2………Dry season  3………Neither |  |
| Q14. Does your household have electricity?  1………………Yes  2……..……….No >>16 |  |
| Q15.How regular is your power supply after sunset?  1……………Regular  2……………Cut once or twice a week  3……………Cut more than twice a week |  |
| Q16. Distance to the nearest public toilet in metres? (code NA if there are no public toilet and people go to the bush).  DISTANCE IN METRES  [If NA>>Q23] |  |
| Q17. Average time spent travelling to and waiting at public toilet (in minutes).  TIME SPENT IN MINUTES |  |

END TIME :HOUR MIN