Questionnaire number	I	of		i
Questionnane number	l	01		L

Zambia Social Protection Scheme Child Grant Baseline Survey 2010 Kalabo, Kaputa and Shang'ombo Districts

Questionnaire serial number	_
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1. Metadata – ALWAYS FILL IN BASIC INFORMATION BEFORE THE INTERVIEW

1. Today's date:	- (DD-MM-YY)		
2. Time start interview:	: (24 hr clock)	3. Time end interview:	: (24 hr clock)
4. Province:		18. Main language used by enumerator in this interview?	1 1
5. District:		(1) Tonga (2) Nyanja	(5) Bemba (6) Lozi
6. Constituency:		(2) Nyunju (3) English (4) Other, specify:	(0) L021
7. Ward		19. Main language used by respondent	
8. ACC name and id:		in this interview? (1) Tonga	 (5) Bemba
9. CWAC name and id:		(2) Nyanja (3) English	(6) Lozi
10. Village/locality name		(4) Other, specify:	
11. Household head and id		20. Was a translator used? $(1 = Yes; 2 = No)$	
12. Intended respondent		21. Response status	
13. Respondent if different		(1) Complete interview	
14. Enumerator name and code		(2) Partially complete, reason:(3) Non-contact(4) Refusal	
15. Supervisor name and code (Supervisor, please sign next	to name after checking the work)	(5) Other, specify:	
16. Is this a repeat visit to this ho Yes1; No2> <i>Question</i>			
17. How many times have you ha	nd to visit before the interview?		

Ouestionnaire	serial	number			

INFORMED CONSENT STATEMENT

Introduction

"Hello. How are you? My name is [ENUMERATOR NAME], and I am working with a team from the Ministry of Community Development and Social Services in Lusaka. We are conducting a survey of households in this district, and your household was chosen to be interviewed in this community.

I would like to ask you some questions about your household and community. We are asking you these questions to find out more about your household, your household's economic activities, health and other measures of well-being. We hope that this information will eventually benefit the entire community by allowing us to understand the challenges that households like yours face, and how to mitigate them. I will keep everything that you tell me entirely private and confidential, and will not talk to other people about what you have said.

You do not need to talk to me if you do not want to. And if there is any question you do not want to answer, that will be fine. It is important you understand that the answers you give will in no way affect your status with respect to the Ministry of Community Development and Social Services. If you have any problems, or if you feel uncomfortable answering any question, you should feel free to stop talking with me at any time. You can speak with people in the District Social Welfare Office in Town for more details or clarification of this study.

Will you please give me some time to speak with you?"

	SECTION 1: HOUSEHOLD ROSTER AND OVC STATUS										
	INTRO	DUCTION: I	would like to sta	rt the interview by asking you que	stions about yo	urself and ot	her usual	members of the ho	usehold		
1	2		3	4	5	6a		6b		7	
MEMBER	Please give me the names of all	How old is	.now?	What is the relationship ofto the	Is male or	Does	Is blind,	partially sighted, deaf,	dumb, crippled,	What is's cell phone	
ID	persons who usually live with	RECORD EXAC	CT AGE IN	intended respondent?	female?	have any	mentally re	etarded, mentally ill, ex	c-mental?	number?	
NUMBER	this household. Start with the	COMPLETED	YEARS	INTENDED RESPONDENT=01		disability?				[REMIND THAT WE	
[PID]	head of the household and	FOR THOSE A	GED 5 YEARS	SPOUSE=02	MALE=1		BLIND=1		WILL READMINISTER		
	include visitors who have lived	AND ABOVE.		BIOLOGICAL CHILD=03	FEMALE=2	YES=1	PARTIALLY SIGHTED=2		SURVEY IN 2 YEARS AND		
	with the household for six	FOR THOSE 0-	59 MONTHS	STEP CHILD=04		NO=2>> Q7	DEAF=3		WILL NEED TO CONTACT		
	months or more. Include usual	OLD.RECCORI	D THE AGE IN	ADOPTED CHILD=05			DUMB=4		THEM]		
	members, who are away visiting,	MONTHSUSE U	JNDER FIVE	GRAND CHILD=06			PHYSICALLY DISABLED=5				
	in hospital, at boarding schools	CLINIC CARD	IF AVAILABLE.	BROTHER/SISTER=07			MENTALLY RETARDED=6		'IF THERE IS NO CELL		
	or college or university, etc.	•		COUSIN=08			MENTAL	LY ILL=7		PHONE THAT THIS	
	[First Name, Last Name]			NIECE/NEPHEW=09			EX-MENT	TAL=8		PRESON USES THEN	
		(SPECIFY AGE	CODE	BROTHER/SISTER-IN LAW=10				OTHER(SPECIFY)=9		ENTER 99'	
		BELOW)		PARENT=11			[RECORD UP TO THREE DISABILITIES]				
			EARS	PARENT-IN-LAW=12							
		2 Me	ONTHS	OTHER RELATIVE=13							
				MAID/NANNY/HOUSE-							
				SERVANT=14			st 1	nd 2	rd 3		
			9055	NON-RELATIVE=15			1	2	3		
		AGE	CODE								
									1		

			SECTION	1: HOUSEHOLD ROSTI	ER AND OVC STA	ATUS (Cont	tinued)					
	8	9	10	11	12	13	14	15	16	17	18	19
	FOR THOSE			FOR THOSE A	GED 0-18					FOR TH	OSE AGE	D 5 TO
	AGED 12 AND										18	
	ABOVE											
	What is the marital	Is the biological mother of	If mother not living in	Is the biological father of	If father not living in	If child's	If child's	Does have	Do any of	Does	Does	Does
PID	status of?	alive?	household:	alive?	household:	mother is	father is	any brothers or	these	have a	have a	have at
						dead, record	dead,	sisters under	siblings live	blanket?	pair of	least 2
	NEVER	YES, MOTHER LIVES IN	Has's mother been	YES, FATHER LIVES IN	Has's father been	year of	record	age 18 who	in another	(EITHER	shoes?	sets of
	MARRIED=1 MARRIED=2	HOUSEHOLD=WRITE PID	very sick for at least 3	HOUSEHOLD=WRITE PID	very sick for at least 3	death. YYYY	year of	have the same	household?	SHARED OR	YES=1	clothes?
	SEPARATED=3	YES, BUT MOTHER NOT IN	months during the past 12 months? That is, too	YES, BUT FATHER NOT IN HOUSEHOLD=88	months during the past 12 months? That is,	YYYY	death.	mother and the same father?	YES=1	OWNED)	NO=2	YES=1
	DIVORCED=4	HOUSEHOLD=88	sick to work or do	HOUSEHOLD-00	too sick to work or do		1111	same rather:	NO=2	OWNED)	DK=8	NO=2
	WIDOWED=5		normal activities?	IF NO, FATHER IS	normal activities?			YES=1		YES=1		DK=8
	CO-HABITING=6	NO, MOTHER IS DEAD=99		DEAD=99 >> Q13		'If don't	'If don't	NO=2 >> Q17		NO=2		
		>> Q11	YES=1		YES=1	know enter	know	DK=8>>Q17		DK=8		
		DON'T KNOW=7777>>Q11	NO=2	DON'T KNOW=7777>>Q13	NO=2	7777'	enter					
			DON'T KNOW=8		DON'T KNOW=8		7777'					

			SEC	TION 2: HEALTH FO	OR ALL PERSONS			
		INTRODUC	TION: I am now go	oing to ask you about the l	nealth status of the member	rs of the household		
	1	2	3	4	5	6	7	8
PID Enter personal identification number here	1 Has been sick or injured during the last two weeks? YES SICK=1 YES INJURED=2 >> 03 YES BOTH=3 NO=4 >> 08 DON'T KNOW=5 >> Q8		TION: I am now go		nealth status of the member	Which health or other institution/persons did visit first for this illness/injury? GOVT HOSPITAL=01 GOVERNMENT HEALTH CENTRE/CLINIC=02 GOVERNMENT HEALTH POST=03 MISSION INSTITUTION=04 COMMUNITY HEALTH WORKER =05 PRIVATE INSTITUTION=06 MEDICAL PERSONNEL=07 TRADITIONAL HEALER=08 FAITH/SPIRITUAL/CHURCH HEALER=09 OTHER (SPECIFY)=10	What was the method used for paying for the services of the facility on this visit? PRE-PAYMENT SCHEME LOW COST=1 PRE-PAYMENT SCHEME HIGH COST=2 PAID FOR BY EMPLOYER=3 PAID BY INSURANCE=4 PAID PART AND THE OTHER PART BY OTHER; EMPLOYER, FRIENDS, INSURANCE)=5 PAID DIRECTLY=6 DIDN'T PAY=7 PAID FOR BY OTHER (SPECIFY)=8 NOT APPLICABLE=9	8 Has been continuously ill, for at least 3 months in the last 12 months? YES=1 NO=2 >> Q11

				SECTION 2: H	EALTH (CONT'	D)			
	9	10	11	12	13	14	15	16	17
	What was mainly suffering from?	Has been able to carry		ONLY FOR H	OUSEHOLD ME	EMBERS WHO A	RE 18 YEARS OF	AGE AND ABOVE	
PID	FEVER/MALARIA=01 COUGH/COLD/CHEST INFECTION=02 TUBERCULOSIS (TB)= 03 ASTHMA=04 BRONCHITIS/PNEUMONIA/CHEST PAIN=05 DIARRHOEA=06 VOMITING=07 ABDOMINAL PAINS=08 SKIN RASH/SKIN INFECTION=09 PARALYSIS OF ANY KIND=10 HYPERTENSION=11 DIABETES/SUGAR DISEASE=12 EYE INFECTION=13 TOOTHACHE/MOUTH INFECTION=14 HEADACHE=15 BACKACHE=16 HIV/AIDS=17 OTHER, SPECIFY =18	out his/her normal activities during the period of the illness? YES=1 NO=2	How would you rate your health in general? Excellent=1 Very Good=2 Good=3 Fair=4 Poor=5	Compared with your health one year ago, would you say that your health is: Better=1 About The Same=2 Worse=3	How would you rate yourself when engaging in vigorous activities(such as run, lift a heavy load, lift a bucket of water)?. Would you do this , Easily=1 With Difficulty=2 Not at all=3	Can you engage in moderate activities (such as work on the farm, carry a baby, or walk 5 km)? Easily=1 With Difficulty=2 Not At All=3	Can you carry a 10 KG bag of shopping for 500 meters? Show distance Easily=1 With Difficulty=2 Not At All=3	If you had to bend, squat, or kneel, could you do it: Easily=1 With Difficulty=2 Not At All=3	Are you able to walk 2 KMS? Easily=1 With Difficulty=2 Not At All=3
	OTHER, SPECIFT -18								

SECTION 3A: EDUCATION – FOR ALL PERSONS AGE 3 and ABOVE

INTRODUCTION: I am now going to ask you about the educational status of members of this household age 3 and above

	INTRODUCTION. I am now going to ask you about the educational status of members of this nousenota age 3 and above											1
	1	2	3	4	5	6	7	8	9	10	11	12
PID	Is currently attending school?[INCLUDING THOSE IN COLLEGES AND UNIVERSITIES] YES, NURSERY/PRE- SCHOOL=1 >>Q13 YES, OTHER GRADES FULL TIME=2 YES, OTHER GRADES PART TIME=3 YES COMM. SCHOOL FULL	What grade/ level of education iscurrently attending? [SEE CODES BELOW]	What grade was attending last year? [SEE CODES ON THE NEXT PAGE] [IF NOT ATTENDING SCHOOL LAST	How many days did attend school in the past week? 0-5 Holiday=8	Hov	v much are	's schooling e	How many minutes does it take for to get to school?	What mode of transportation does mainly use to get school? WALKING=1 BICYCLE=2 BUS=3 CAR OR TAXI=4 OTHER (SPECIFY)=5			
	TIME=4 YES CORRESPONDENCE=5 YES ADULT LITERACY CLASS=6 >> Q13 YES TERTIARY SCHOOL=7 OTHER SPECIFY=8 NO=9 >> Q14		YEAR E.G. JUST STARTED SCHOOL, RECORD 88]		FEES	UNIFORM	TRANSPORT	STATIONARY & BOOKS	PTA Levy	OTHER, SPECIFY		
		L	1	l	L	l	L	1	1	L	1	l

		SECTION 3A: EDUCATION-FOR ALL PERSONS AGE 3 AND ABOVE (CONT'D)							
	13	14	15	16	17	18	19		
	Is the school currently	Has ever	Was attending school last year?	What grade	What was the	What was the main reason for leaving school at the	Why has never attended school?		
PID	attending, a Government,	attended school?		was attending	highest grade	time?			
	Community,		[INCLUDING THOSE IN COLLEGES,	last year?	attained?	STARTED WORKING/BUSINESS=01	UNDER-AGE=01		
	Mission/Religious, Industrial		UNIVERSITIES]			EXPENSIVE.=02	WAS NEVER ENROLLED=02		
	or private school?	YES=1		[USE CODES	[USE CODES	TOO FAR=03	COULDN'T GET A		
		NO=2 >> Q 19	YES, NURSERY/PRE-SCHOOL=1 >>[NEXT	BELOW]	BELOW]	NOT SELECTED/FAILED=04	PLACE=03		
	GOVT=1		SECT]			PREGNANCY=05	EXPENSIVE=04		
	COMMUNITY (council)=2		YES, OTHER GRADES FULL TIME=2			MADE GIRL PREGNANT.=06	NO FINANCIAL SUPPORT=05		
	MISSION/RELIGIOUS=3		YES, OTHER GRADES PART TIME=3			COMPLETED STUDIES/SCHOOL=07	SCHOOL TOO FAR=06 ILLNESS/INJURY=07		
	INDUSTRIAL=4		YES COMM. SCHOOL FULL TIME=4			GOT MARRIED=.08	SCHOOL NOT IMPORTANT=08		
	PRIVATE=5		YES CORRESPONDENCE=5			NO NEED TO CONTINUE SCHOOL=09	UNSAFE TO TRAVEL		
	OTHER (SPECIFY)=6		YES ADULT LITERACY			SCHOOL NOT IMPORTANT=10	TO SCHOOL=09		
	l		CLASS=6>>[NEXT SECT]			UNSAFE TO TRAVEL TO SCHOOL=11	OTHER (SPECIFY)=10		
	NEXT SECTION		YES TERTIARY SCHOOL=7			EXPELLED=12			
			OTHER SPECIFY=8			LACK OF FINANCIAL SUPPORT=13			
			NO=9 >> Q17			NEEDED TO HELP OUT AT HOME=14			
						ILLNESS/INJURY/DISABLED=15			
						ABUSIVE TEACHER=16			
						OTHER (SPECIFY)=17			
						NEXT SECTION			

GRADE CODES: Grade 1 to 12=CODES 01 TO 12

Grade 12 GCE (O-level)=CODE 12

Grade 12 GCE (A-level)=CODE 13

College=CODE 14

Undergraduate University students=CODE 15

Post-graduate Certificate/Diploma students=CODE 16

Masters Degree students=CODE 17 Doctoral level and above students=CODE 18

	SECTION 4: MAIN ECONOMIC ACTIVITY – FOR ALL PERSONS AGED 5 YEARS AND ABOVE										
		to ask about the economic activity status of son									
	1	2	3	4							
PID	What is your main current economic activity status? Are you IN WAGE EMPLOYMENT	What is your employment status? SELF EMPLOYED01 CENTRAL GOVT EMPLOYEE02 LOCAL GOVT/COUNCIL EMPLOYEE03 PARASTATAL/ QUASI- GOVT EMPLOYEE04 PRIVATE SECTOR EMPLOYEE05	Are there five (5) or more people working in this company/business including the owner? YES1 NO2	What is the lowest daily wage for which is willing to work for someone (in's main field or occupation of interest)? KWACHA							
	UNPAID FAMILY WORKER	NGO EMPLOYEE	[INCLUDING ALL WORKERS IN ALL BRANCHES OF THE SAME COMPANY/BUSINESS] GO TO QUESTION 5								

	SEC	CTION 4B: ECONO	MIC ACTIVITY (MEMBE	ERS AGED 5-18	ONLY)	
		PAII) WORK	ONLY		9
	5	6	7		8	
PID	Does normally do any	In the past two weeks,	What is the total amount of money	What are first and sec	ond most common kinds	UNPAID WORK ONLY
	work, either paid or unpaid,	how many hours did	that was paid for the work	of work thatdoes	for pay?	In the past two weeks,
	including unpaid domestic	spend in paid work?	s/he did in the past 2 weeks?			how many hours did
	work/chores?		Include the value of in-kind	Domestic work	1	spend in unpaid work
		[HOURS, ENTER 0 IF	payments including food.	Farming-crops	2	including domestic chores,
	YES01	DID NOT ENGAGE IN		Farming-livestock	3	work on farm, etc?
	NO02 >>NEXT	PAID WORK AND GO		Fishing4		
	SECTION	TO Q8]		Trade/recycling	5	[HOURS, ENTER "0" IF
				Business work-selling	or making things for	DID NOT ENGAGE IN
	[FOR UNPAID WORK GO			sale6		UNPAID WORK]
	TO Q9]			Casual labor7		
				Construction or repair	work8	
				Other, specify	9	
		*****		TYP GT	arcov.	HOURS
		HOURS	KWACHA	FIRST	SECOND	

SECTION 5: INCOME FOR ALL PERSONS AGED 16 AND ABOVE												
I am now	going to ask a	about income earned for e		nber. [ENUMERATOR: ASI				IVIDUAL IF PRESENT IN	HOUSEHOLD.			
	1	2	3	4	5	6	7	8	9			
PID	Individual	How much income did you	How much income	How much is your regular	How much income in-	How much	How much did you	How much did you receive in	How much income did you			
	reported for	receive from the main Non	did you receive	gross monthly salary/wage	kind do you receive per	remittances did you	receive as pension	grants and assistance (both	receive from any other source			
	himself or	farm business in the last	from the other Non	including regular allowances	month from your jobs	receive last month?	payment last	cash and in-kind, e.g. from	last month?			
	herself?	one month?	farm businesses, in	such as housing and transport	(e.g. bags of mealie		month?	PWAS, NGOs, church				
	YES1		the last one	allowances, regular overtime,	meal, charcoal etc.)?			groups)?				
	NO2		month?	retention allowance, from the					Enter '0'if none			
		Enter '0' if none	Enter '0'if none	main job?	CONVERT TO	Enter '0'if none	Enter '0'if none	Enter '0'if none				
					KWACHA							
		KWACHA	KWACHA	KWACHA	EQUIVALENT	KWACHA	KWACHA	KWACHA	KWACHA			
\longrightarrow												

			SECTIO	ON 6: INVENTORY (OF HOUSEHOLD AS	SETS			
1			2	3	1			2	3
Read Aloud Name of Item	I Aloud Name of Item ITEM CODE CODE Yes=1		your household own? item obtained? [Functioning and PURCHASED =1		Read Aloud Name of Item	oud Name of Item CODE 'Do you own a?		How many [ITEM]s does your household own?	How was the most recent item obtained? PURCHASED=1
		Yes=1 No=2>>Next item	repairable items only] NUMBER	GIFT =2 OWN MADE=3 INHERITED=4 OTHER, SPECIFY=5			Yes=1 No=2>>Next item	[Functioning items only] NUMBER	GIFT=2 OWN MADE=3 INHERITED=4 OTHER, SPECIFY=5
Bed	1				Pick	39			
Mattress	2				Ное	40			
Mosquito net	3				Hammer	41			
Table (dining)	4				Shovel/spade	42			
Lounge suit/sofa	5				Fishing net	43			
Radio/stereo	6				Hunting gun	44			
Television	7				Plough	45			
DVD/VCR	11				Crop sprayer	46			
Cellular phone	14				Knitting machine	47			
Watch	16				Lawn mower	48			
Clock	17				Generator	49			
Stove (gas or elect.)	21				Small/hand driven tractor	50			
Refrigerator	23				4 wheel tractor	51			
Deep freeze	24				Wheel barrow	52			
AC/ventilator	27				Scotch cart	53			
Electric iron	28				Bicycle	54			
Non-electric iron	29				Motor cycle	55			
Pvt. Water pump	30				Large truck	56			
Sewing machine	31				Small/pick-up truck	57			
Hand hammer mill	32				Van/mini-bus	58			
Grinding hammer mill (powered)	33				Car	59			
Sheller	34				Canoe	60			
Rump Presses/ oil expeller	35				Boat	61			
Hand saw	36				Oxen	62			
Carpentry plane	37				Donkey	63			
Axe	38				Solar Panel	64			

SECTION 7 HOUSEHOLD AMENITIES AND HOUSING CONDITIONS										
	INTRO	DUCTION: I am now going to ask you about various amenities and housing conditions								
No.	QUESTION	CATEGORY AND CODE	CODE							
1A	What kind of dwelling does your household live in?	TRADITIONAL HUT 1 HOSTEL 10 IMPROVED TRADITIONAL HOUSE 2 NON-RESIDENTIAL BUILDING DETACHED HOUSE 3 (EG SCHOOL CLASSROOM, ETC) 11 FLAT/APARTMENT/MULTI-UNIT 4 UNCONVENTIONAL (EG KANTEMBA, SEMI-DETACHED HOUSE 5 STORAGE CONTAINER, ETC) 12 SERVANTS QUARTERS 6 OTHER (SPECIFY) 13 GUEST WING 7 COTTAGE 8 HOUSE ATTACHED TO/ON TOP OF SHOP ETC 9	III							
1B	How many rooms are occupied by this household exclud belonging to the household collectively)	ing bathrooms and toilets? (For rural areas count the number of rooms in each hut NUMBER	111							
2	On what basis does your household occupy the dwelling you live in? Is it []? READ OUT	Owner-occupied	11							
3	If you were to rent out this house, how much would it fetch per month (excl water and electricity)?	AMOUNT IN KWACHA								

	SECTION	ON 7 HOUSEHOLD AMENITIES AND HOUSING CONDITIONS (Cont'd)	
4	What kind of building materials is/are the [] of this dwelling made of ? [IF A MULTI-STOREY/UNIT BUILDING RECORD BUILDING MATERIALS OF THE OUTER ROOF (ROOF TOP) AND OUTER WALL].	(A) ROOF ASBESTOS SHEETS	II
		CONCRETE	_
5	What is the main source of water supply for this household? How far is this source of water from this house?	DIRECTLY FROM RIVER/ LAKE/ STREAM/DAM	III
6	How far is this source of water from this house? [IF LESS THAN ONE KILOMETRE use decimal places	DISTANCE IN KILOMETRES	

	SECTI	ON 7 HOUSEHOLD AMENITIES AND HO	OUSING CONDITIONS (Cont'd)	
7	What is the main source of drinking water for this	DIRECTLY FROM RIVER/ LAKE/		
	household?	STREAM/DAM1	PUBLIC TAP8	
	nousenord.	RAINWATER2	OWN TAP9	
		UNPROTECTED WELL	OTHER TAP (EG FROM NEARBY	
		ON ROTECTED WELL		
			BUILDING)10	
		PROTECTED WELL4	WATER KIOSK11	
		BOREHOLE5	BOUGHT FROM OTHER VENDOR12	
		UNPROTECTED SPRING 6	BOTTLED WATER 13 >> Q9	
		PROTECTED SPRING7	OTHER (SPECIFY)14	
8	Do you treat your drinking water?	YES1		
		NO2		ll
9	What is the main type of energy used for lighting in	KEROSINE/PARAFFIN 1	OPEN FIRE6	
	your household?	ELECTRICITY2	TORCH7	
	, , , , , , , , , , , , , , , , , , , ,	SOLAR PANEL3		
		CANDLE 4	NONE8	
		DIESEL5	OTHER (SPECIFY)9	
10	What is the main type of energy that your household	COLLECTED FIREWOOD1	GAS7	
10		PURCHASED FIREWOOD	ELECTRICITY8	
	uses for cooking?	T CROSS BEEN GOD IIIIIIIII 2	SOLAR9	
		CHARCOAL OWN PRODUCED 3	CROP/LIVESTOCK RESIDUES10	
		CHARCOAL PURCHASED4	OTHER (SPECIFY)11	''
		COAL5		
		KEROSINE/PARAFFIN6		
11	What is the main type of cooking device used by your	STOVE/COOKER1	HOT PLATE ON WELDED STAND8	
	household?	BRAZIER (MBAULA)2	OTHER (SPECIFY)9	
		CLAY STOVE (MBAULA)		
		BRICK/STONE STAND ON OPEN FIRE4		II
		METAL STAND ON OPEN FIRE5		
		VEHICLE TYRE RIM 6		
		HOT PLATE WITHOUT STAND7		

	SECTION	ON 7 HOUSEHOLD AMENITIES AND HO	OUSING CONDITIONS (Cont'd)	
12	Is your house connected to electricity?	YES1		II
		NO2		
13A	What is the main type of toilet facility for this	OWN FLUSH TOILET INSIDE THE HOUSEHOLD 1	COMMUNAL PIT LATRINE WITHOUT SLAB 7	
	household?	OWN FLUSH TOILET OUTSIDE THE	NEIGHBOUR'S/ ANOTHER HOUSEHOLD'S	
		HOUSEHOLD2	PIT LATRINE WITHOUT SLAB8	
	[READ OUT]	OWN PIT LATRINE WITH SLAB3		_
		COMMUNAL PIT LATRINE WITH SLAB4	BUCKET/ OTHER CONTAINER9	
		NEIGHBOUR'S/ ANOTHER HOUSEHOLD'S	AQUA PRIVY10	
		PIT LATRINE WITH SLAB5	NONE11	
		OWN PIT LATRINE WITHOUT SLAB6	OTHER (SPECIFY)12	
13B	If flush/ pour flush: Where is the sewerage piped into?	Piped sewer system1	Other (specify)4	
		Septic tank2		II
		Pit latrine3	Don't know5	
14	What is the main method of garbage disposal that this	REFUSE COLLECTED 1	DUMPING3	
	household uses?	PIT2	BURNING4	II
			OTHER (SPECIFY)5	

	SEC	TION 8: ACCESS TO FA	ACILITIES AND PROGRAMS		
	INTRODUCTION:	I am now going to ask yo	ou questions about distances to var	rious facilities	
	1		2	3A	3B
Facility Code	Facility Type	Do you know where the nearest is located?	How far is it to the nearest? [READ OUT FACILITIES]	Normally, by what means do yo does it take you to get there usin Normal means:	ou get there? Normally how long ng this means? Normal time:
		YES1 NO2 >> NEXT FACILITY	[GIVE DISTANCE IN KM. IF LESS THAN A KILOMETRE ENTER 00 IF MORE THAN 90KM ENTER 90. IF DON'T KNOW ENTER 99]	ON FOOT1 BICYCLE2 MOTORBIKE3 SCOTCH CART4 PUBLIC TRANSPORT5 PERSONAL VEHICLE6 OTHER (SPECIFY)7	LESS THAN 10 MIN1 BETWEEN10-19 MIN2 BETWEEN20-29 MIN3 BETWEEN30- 59MIN4 1 HOUR AND ABOVE5
1.01	Food Market				
1.02	Post Office/postal agency				
1.03	Community School				
1.04	Lower Basic School (1 – 4)				
1.05	Middle Basic School (1 – 7)				
1.06	Upper Basic School (1 – 9)				
1.07	High School				
1.08	Secondary School				
1.09	Health Facility (Health post/center/clinic/hospital)				
1.10	Hammer mill				
1.11	Input market (for seeds, fertilizer, agric. implements)				
1.12	Police station/post				
1.13	Bank				
1.14	Public transport (road, or rail, or water transport)				
1.15	Pharmacy				

		SECTION 8: A	CCESS	TO FACILITIES AND PROG	GRAMS (Continued)				
	4	5		6	7	8	9		
Name of government	.During the past 12 months has any	What is the total v	ılue	During the past 12 months has	What is the total value of	During the past 12 months has	What is the total value of		
program	member of your household received	of assistance recei	ed	any member of your household	assistance received from	any member of your household	assistance received from		
	money or goods, including food,	from this program in the last 12 months?			all these non-government	received money or goods,	all these non-household		
	clothing, livestock or medicines from			the last 12 months?		the last 12 months? including food, cl-		including food, clothing,	sources in the last 12
	any of the following government	[Convert in-kind		livestock or medicines from	months? [Convert in-kind	livestock or medicines from	months? [Convert in-kind		
	programs	assistance to Kwa	ha.]	any NGO, church or other non-	assistance to Kwacha.]	individuals who are not part of	assistance to Kwacha.]		
				government group ?		your household?			
	YES1	KWACHA>> <i>Nex</i>		YES1		YES1			
	N02>>Next Program	Program		NO2>> Q8	KWACHA	NO2>>Next Section	KWACHA		
4a. Farm Input Subsidy		5a							
4b.Food Security Pack		5b							
4c. PWAS		5c							
4d. Other, specify 1		5d							
4e. Other specify 2		5e							
4f. Other specify 3		5f							
4g. Other specify 4		5g							

							SECT	ΓΙΟΝ 9A: AG	RICULTU	JRAL PROI	OUCTION						
						INTRO	DUCTION: I	am now going	to ask vou	auestions abo	ut Agricultui	ral Production					
1.	Did any member of thi	s househo	ld <u>or any</u> l	body on t	their behalf grow										YES1 NO2 >> N	EXT SECTIO	DN
Q.	2.		3		4			5			6	7			8		
	Which crops did you p Record an answer for type of crop - starting food crops, then non-j crops - before collectin on each.	each with food	What warea pla under the crop? LIMA. ACRE. HECTA 'If less quarter	1 2 ARE3	How many bag harvest during How many kild [CROP] weigh For all applica the way the cred Unthreshed	this season? ograms does of? the crops, moore is prepared1234	one bag of uke sure to ask	How many bags/tins of the harvested [CROP] were sold in total? How much of the harvested [CROP] during the agricultural season was lost to rotting, insects, rodents, theft, etc. in the post harvest period? How much of the harvested [CROP] during the agricultural season did you insects, rodents, theft, etc. in the post feed and save for seed? If nothing, record "00" in "Number of bags" Estimate the value of in-kind payments For all applicable crops, make sure to ask whether the way the crop is prepared, using code in question 4 How much of the harvested [CROP] during the agricultural season did you feed and save for seed? If nothing, record "00" in "Number of bags" whether the way the crop is precode in question 4				Now much of the harvested [CROP] during the agricultural season was lost to rotting, assects, rodents, theft, etc. in the post arvest period? If nothing, record "00" in "Number of bags" or all applicable crops, make sure to ask whether the way the crop is prepared, using			u use as animal umber of bags" te sure to ask		
		ı	leave it	out	Flour	6	ı		ı	1							
	Name	Crop	Area	Unit	Number of	Kg per	Preparation	Number of	Kg per	Preparation	Kwacha	Number of	Kg per	Preparation	Number of	Kg per	Preparation
1		Code			Bags/Tins	Bag/Tin		Bags/Tins	Bag/Tin	Code (O.4)		Bags/Tins	Bag/Tin	Code (Q.4)	Bags/Tins	Bag/Tin	Code (O.4)
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	

1=Maize; 2=Millet; 3=Sorghum; 4=Groundnuts; 5=Cowpeas; 6=Soya beans; 7=Other beans; 8=Sweet potatoes; 9=Irish potatoes; 10=Cotton; 11=Virginia tobacco; 12=Burley Tobacco; 13=Vegetables; 14=Cassava; 15=Fruit trees; 16=Sunflower, Other(specify);..........

	SECTION 9A: AGRICULTURAL PRODUCTION (cont'd)													
		9			10			11	12		13	14		15
	Please copy crop code from Q.2	How much of the harvested [CROP] during the agricultural season did your household consume? For all applicable crops, make sure to ask the way the crop is prepared Unthreshed1 Threshed2 Unshelled3 Shelled4 Chips5 Flour6			How much of the harvested [CROP] during the agricultural season did you process to prepare [CROP] by-products? For all applicable crops, make sure to ask the way the crop is prepared, using code in question 8 If none, insert 0 and go to next crop.			Which by-products did you produce? Preserves1 Jam2 Straw3 Flour5 Chips06 Other(specify)9	How much of the [PRODUCT] did you sell in the agricultural season? If none, insert 0 and go to 13	Liter1 Kg2 Piece3	What was the total value of sales in the agricultural season? Estimate a value for in-kind payments	How much of the [PRODUCT] did your household consume in the agricultural season? If none, insert 0.	Liter1 Kg2 Piece3	How much did you spend to produce this [product]?
	Стор	Number of	Kg per	Preparation	Number of	Kg per	Preparation	Code	Quantity	Unit	Kwacha	Quantity	Unit	Kwacha
1	Code	Bags/Tins	Bag/Tin		Bags/Tins	Bag/Tin	Code (Q.8)							
2														
3														
4														
5														
6														
7														
8														
9														
10														

						S	ECTION 9B:	LIVESTOCK A	AND ANIMAL	PRODUCTIO)N			
	1.		2.				3.	4.	5.	6.	7.	8.	9.	10
Livestock	During the last 1	12 months,	a. How	many [LIV	ESTOC	K] does	If you were	During the last 12	How much did	During the	During the last	What was the	Did you get any	Which by-products did
code	have you or any	member of	your hou	usehold ow	n now (on your	selling one of	months, how	you spend in	last 12	12 months, how	total value of	by-products	you produce?
	your household	owned any	farm or	away)?			the	many have you	total to buy these	months, how	many	sales?	(milk, eggs,	Fresh milk1
	[ANIMAL]?		b. How	many did y	ou own	exactly	[ANIMAL]	bought to raise?	[ANIMAL]	many	[ANIMAL] have	Estimate a	skins, leather,	Milk products2
	Record an answ	er for each	12 months ago?				today, how	IF NONE,	during the last	[ANIMAL]	you sold alive?	value for in-	dried meat,	Eggs3
	type of animal before		c. How many were born?				much would	RECORD "0"	12 months?	died, got lost	IF NONE,	kind	etc?)	Skin, hides4
	continuing the rows . Yes1 No2 >> NEXT ANIMAL		d. How many received as gifts? IF NONE, RECORD "0" AND			ifts?	from the sale		or stolen? RECORD "0"	payments	Yes1	Leather5		
								for in-kind	IF NONE,	AND SKIP TO		No2 >>	Dried meat6	
						AND		payments RECORD "0" Q9		NEXT ANIMAL	Write all answers			
			SKIP TO 6											
	Name		a.	b.	c.	d.	Kwacha	Number	Kwacha	Number	Number	Kwacha		Codes
201	Milk cows													
202	Other cattle													
203	Goats													
204	Sheep													
205	Donkeys													
206	Horses													
207	Chicken													
208	Duck, Geese													
209	Guinea fowls													
210	Turkey													
211	Rabbits													
212	Pigeons													
213	Pigs													
214	Other(specify)													

SECTION 9C: FISH FARMING											
11		12.	13.	14.	15.	16					
Is any member of this household engaged in fish	Fish	How much fish did you harvest	How much fish did you sell in	What was the total value of sales in the	How much fish did your	How much did you					
farming?	Code	in the past 12 months?	the past 12 months?	last 12 months?	household consume in the past	spend to produce fish in					
YES1			If none, insert 0 and go to 15	Estimate a value for in-kind payments	12 months?	the past 12 months?					
NO2>>Section 9D											
		KILOGRAMS	KILOGRAMS	KWACHA	KILOGRAMS	KWACHA					
	215										

		SECTION 9D): HOUSEHOI	LD EXPE	NSES FOR LIVESTOC	K AND ANIMAL PROD	UCTION			
		1.	2.		3.	4.	5.	6.	7.	
	During the 2009/10 agricultural season, did you incur any of the following [COST] (with or without credit)?	Yes1 No2 >>NEXT COST	What quantity did y	ou buy?	How much did you spend on [COST] during the 2009/2010 agricultural season?	How did you finance the expenditure of [COST]? Paid in full, with own money1	How much did you pay up-front for [COST]? If nothing, record zero.	How much did you repay/will you repay in total?	Who did you get Friends, relatives Money-lender Cooperative	s1 2
			Quantity	Liter1 Kg2 Piece3 Days4	Sum payments in cash and the estimated value of in-kind payments	>>NEXT COST Credit for the whole cost2 >> GO TO Q.6 Part own money, part on credit	Sum payments in cash and the estimated value of in-kind payments	Sum payments in cash and the estimated value of in-kind payments	NGOs Min. of Agriculti Commercial ban Other(specify) Insert up to 2 co	ure5 k6
Code			Quantity	Unit	Kwacha	Code	Kwacha	Kwacha	Code	Code
	tures for agricultural production	T					I	I	1	
301	Seeds									
302	Equipment (rental, repairs, spare parts), tools									
303	Draft animals costs									
304	Hired labor for production (planting, weeding, harvest)									
305	Pesticides, herbicides									
306	Fertilizers, manure									
307	Petrol/diesel/oil/fuel									
308	Transportation (not including fuel/petrol)									
309	Crop storage facility									
310	Bags, containers, strings, packaging									
311	Land rental									
312	Other(specify)									
Expendi	tures for animal production		·							
321	Fodder, feed									
322	Maintenance of pens/stables (tools, equipment,)									
325	Hired labor for herding, other livestock costs									
326	Medecines, vaccines									
328	Transportation, veterinary services									
330	Packaging costs									
332	Other(specify)									
Expendi	tures for fish production, aquaculture									
341	Fish eggs and juveniles									
342	Fish pond digging and maintenance									
343	Nets and other equipments									
345	Hired labor									
346	Medecines, feed									
347	Petrol/diesel/oil/fuel									
348	Transportation									
349	Smoking or drying									
351	Fish pond rental									
352	Other(specify)									

	SECTION	10: SELF ASSESSED POVERTY, FOO	D SECUR	ITY AN	ID SHOCKS TO HOUSEHOLD WELFARE		
		INTRODUCTION: I am now	going to ask	about ye	our household welfare		
No.	QUESTION	CATEGORY AND CODE	CODE	No.	QUESTION	CATEGORY AND CODE	CODE
1	Do you consider your household to be non poor, moderately poor or very poor?	NON POOR1 MODERATELY POOR2 VERY POOR3		8	In the past four weeks, did you or any household member have to eat some foods that you really did not want to eat because of a lack of resources to obtain other types of food?	Same as Q6	
2	Compared to 12 months ago, do you consider your household to be better off, the same or worse off now?	Better off		9	In the past four weeks, did you or any household member have to eat a smaller meal than you felt you needed because there was not enough food?	Same as Q6	
3	How many meals excluding snacks do you normally have in a day?	ONE		10	In the past four weeks, did you or any household member have to eat fewer meals in a day because there was not enough food?	Same as Q6	
4.	How many times in the past one month did your household eat fish, poultry or animal products?	ZERO1 ONCE2		11	In the past four weeks, was there ever no food to eat of any kind in your household because of lack of resources to get food?	Same as Q6	
5.	How many times in the past one week did your household eat vegetables?	TWICE		12	. In the past four weeks, was there ever no food to eat of any kind in your household because of lack of resources to get food?	Same as Q6	
6	In the past 4 weeks, did you worry that your household would not have enough food?	[First prompt for 'Yes' or 'No'. If 'Yes', ask how often. No=0 Rarely (once or twice)=1 Sometimes (three to ten times)=2 Often (more than ten times)=3		13	In the past four weeks, did you or any household member go to sleep at night hungry because there was not enough food?	Same as Q6	
7	In the past 4 weeks, were you or any household member not able to eat the kinds of food you preferred because of a lack of resources?	Same as Q6		14	In the past four weeks, did you or any household member go a whole day and night without eating anything because there was not enough food?	Same as Q6	

SEC	CTION 10: S	SELF ASSESSI	ED POVERTY, FOOD SECURI	TY AND SHOCKS TO HOUSI	EHOLD W	ÆLFARE
15			16	17		
During the last 12 months was your household or any member of your household affected by any of the following events?	Event Code	YES=1 NO=2 >> Next Event	Over the last 12 months was the total impact of EVENT to your household positive or negative? POSITIVE=1	Last time EVENT occurred, what did you do to deal with the effects of the EVENT? RECORD UP TO 2 COPING	Coping Code	Coping Strategy Name
			NEGATIVE=2 DK=3	STRATEGIES IN ORDER OF IMPORTANCE		
Drought	101				10	DID NOTHING
Flood	102				11	SPENT SAVINGS
Storm	103				13	SOLD ANIMALS
Crop disease/pests	104				14	GREW / SOLD ADD- ITIONAL / OTHER CROPS
Damage to crop while storage	105				15	SOLD ASSETS (TOOLS, FURNITURE, RADIO, TV, CAR, ETC)
Livestock disease	106				16	SOLD FARM LAND
Better pay/work	107				17A	WORKED MORE HOURS
Job loss/ no salary	108				17B	STARTED BUSINESS
Rise of profit from business	109				18	SENT CHILDREN TO RELATIVES OR FRIENDS
Collapse of business	110				19	MIGRATED FOR WORK
Inability to pay back loan	111				21	SENT CHILDREN TO WORK/SELL
Change in money received from family/ friends	112				22	RECEIVED/ ASKED FOR GIFTS/ ASSISTANCE FROM RELATIVES/ FRIENDS/OTHERS
Change in sale price of crops	113				23	BORROWED MONEY FROM FRIENDS/RELATIVES
Change in agricultural input prices (e.g. seeds)	114				24	BORROWED FROM MONEY LENDER
Change in food prices	115				28	SOUGHT HELP FROM GOV'T
Communal conflict or political crisis	118				29	SOUGHT HELP FROM NGO/RELIEF
Person joined household	119				35	REDUCED NON-FOOD EXPENSES
Illness	122				36	PIECE WORK ON FARMS BELONGING TO OTHER HOUSEHOLDS
Serious injury/accident	123				37	OTHER PIECE WORK
Death of bread earner	124				38	WORKING ON 'FOOD-FOR-WORK OR WORK- FOR-ASSETS' PROGRAM
Death of other person	125				39	EATING WILD FOODS ONLY
	-				40	SUBSTITUTING ORDINARY MEALS WITH MANGOES, PUMPKINS, SWEET POTATOES, etc
					41	OTHER(SPECIFY)

	SECTION 11: WOMEN'S E	EMPOWERMENT, SAVINGS AN	ND FU	TURI	E EXPECTATIONS (MOTHER O	R CARETAKER OF A C	CHILD)	
	Instructions: Ask th	nese auestions to only one woman in ho	ousehol	d, the l	biological mother or primary care-giver o	of any one child age 0-5.		
1	Write down PID of respondent					, ,		
2	If a child is not feeling well, who decides whether to seek treatment?	RESPONDENT=1 HUSBAND/PARTNER=2 RESPONDENT & PARTNER JOINTLY=3 OTHER=4		11	Up to what level would you expect your daughter to go to school?	NONE=1 SOME PRIMARY=2 COMPLETE PRIM. (grade 7)=3 SOME SECONDARY=4		
3	If a child does not want to go to school who would decide whether s/he must go?	SAME CODES AS Q2	L	12	Up to what level would you expect your son to go to school?	COMPLETE SEC. (grade 12)=5 ANY TERTIARY=6		
4	Who usually decides how the money you usually earn will be used?	SAME CODES AS Q2 NEVER EARNED MONEY=9	L	13	Some people try to save some money for emergencies or to buy something special in the future. Are you currently saving (in cash)?	YES=1 NO=2 >>Q15		
5	Who usually decides how the money your partner earns will be used?	SAME CODES AS Q2 PARTNER NEVER EARNED/NO PARTNER=9	L	14	How much have you saved in cash in the last one month?	KWACHA		_
6	Who usually makes decisions about making major household purchases?	SAME CODES AS Q2		15	Where do you keep your savings?	AT HOME=1 INFORMAL SAVING SCHEME=2 SHOP=3		
						NGO/MFI=4 COOPERATIVE=5 BANK OR POST OFFICE=6 OTHER SPECIFY=7		
7	Who usually makes decisions about making purchases for daily household needs?	SAME CODES AS Q2		16	Do you ever think about the future when spending your money?	NEVER=1 SOMETIMES=2 OFTEN=3 ALWAYS=4		
8	Who usually makes decisions about purchasing children's clothes or shoes?	SAME CODES AS Q2		17	How long into the future do you consider when deciding how to spending your money?	FEW DAYS=1 FEW WEEKS=2 FEW MONTHS=3 FEW YEARS=4 NEXT 5 YEARS OR MORE=5		
9	Who usually makes decisions about visits to your family or relatives?	SAME CODES AS Q2		18	Suppose you suddenly win the Lotto. If you could ch or 2 for each option.] Explain that their answer WIL	*	•	
					A: 1. KW200,000 today or 2:K200,000 in one month B: 1. KW200,000 today or 2:K300,000 in one month			
					C: 1. KW200,000 today or 2:K400,000 in one month			
					D: 1. KW200,000 today or 2:K600,000 in one month E: 1. KW200,000 today or 2:K800,000 in one month			
10	If you are feeling sick, who usually decides whether you			19	E: 1. KW200,000 today or 2:K800,000 in one month Do you think your life will be better in [] from no		1	
	should seek treatment?	SAME CODES AS Q2	<u> </u>		A: 1 year B: 3 years C: 5 years		YES=1 NO=2	

				SECTION 12 DEATHS IN THE HOUSEHOLD		
1.	Have there been an	y deaths in the house	chold (of usual members) in the last 1	2 months? YES=1 NO=2>>Next Section		
2.	How many people of	died in the last 12 mo	onths? _	Ask questions below for each deceased member.		
3.	How old was the deceased when s/he died?	4. What was his/her sex? MALE=1	5. Had deceased been continuously sick for at least 3 months prior to his/her death?	6. What was the main cause of death? FEVER/MALARIA=1 CEREBRAL MALARIA=2	BOILS=8 SUICIDE=9	Maternal Death During Delivery =16 Still Birth=17
		FEMALE=2	YES=1 NO=2	COUGH/COLD/CHEST INFECTION=3 BRONCHITIS=4	ACCIDENT=10 DIABETES/SUGAR DISEASE=11	
	in years, 'if less a a year enter '00'			PNEUMONIA/CHEST PAIN=5 DIARRHEA (with or w/o blood)=6 LIVER INFECTION/SIDE PAIN=7	CANCER OF ANY KIND=12 MENINGITIS=13 AIDS=14 OTHER=15	

			[<i>T</i> (SECTION 13A							VI.Y			
	1	2	3	4		5		6		7		8		
PID of child	PID for child's biological mother	PID for child's primary care-	Does child have a birth	Does child have a Health Card? [If yes, please ask	What i	s [NAME	's]	Is being breastfed now?	How lon	_	In addition to breast milk is	s fed on any	of the follo	wing?
	[FROM ROSTER]	taker if biological	registration document?	to see card.]		I from hea	ılth		breast?	. to the	9.1 Any other milk other than breast milk	9.2 Water	9.3 Other	9.4 Solids [e.g. custard, cerelac or
[FROM HOUSE -	IF THE BIOLOGICAL	mother not in household.	YES=1	YES, CARD SEEN=1 YES, CARD NOT	card or registra if avail	ation docu	iment			S THAN 1 RECORD	[e.g. S26, lactogen, promil or other baby formula, Fresh milk,		fluids	other cereal, vitaso, porridge, nshima, etc]
HOLD ROSTER]	MOTHER IS NOT A MEMBER OF	[FROM ROSTER]	NO=2	SEEN=2 NO=3					'00' IF LESS	STHAN	Soya milk, Goat milk, etc]			
	THE HOUSEHOLD ENTER 88, IF BIOLOGICAL MOTHER IS			DONT KNOW=4				YES1 NO2>> Q9	24 HOU RECOR HOURS OTHER	D , wise	YES1 NO2	YES1 NO2	YES1 NO2	YES1 NO2
	DEAD ENTER 99 AND GO TO Q2				DD	ММ	YY		Unit Cod 1=Hours					GO TO Q11

				SEC	CTION 13A:	CHILD H	EALTH AND DEVELOPMENT		
				TO BE COMPLETE	ED FOR CHI	LDREN AC	GED 0 MONTHS TO 60 MONTHS	ONLY [Cont'd]	
	9	10	11	12	13A	13B		14	
PID OF CHILD [FROM PREVIO US PAGE]	Has ever been breastfed? YES1 NO2>Q12	For how many months did you breastfeed? [INDICATE THE NUMBER OF MONTHS e.g. 01, 03, 0 5, 10 etc]	At what age (in months) did you first give water or other fluids or food? MONTHS [IF LESSTHAN ONE MONTH ENTER 00]	How many times is currently given solids foods in a day (nshima, rice, potatoes, porridge, cerelac, other cereals, vitaso, custard, etc)? ONCE	Has [NAME] been taken to a well-baby or under 5 clinic for a check-up in the last 6 months? YES=1 NO=2	check if the child has oedema or not. For children 0-3 months copy birth weight from health card if available. Otherwise weigh child using scale. For children 0-3 months copy birth weight from health card if available. For children 4-24 months measure height lying down For children age 25-60 months.		For children 4-24 months measure height lying down. For children age 25-60 months measure height standing up.]	15.3 How height captured? LYING DOWN1 STANDING UP2 NOT CAPTURED3
				SOLIDS7					
	ll			II	ll	ll		_ . _	II
<u> </u>	l <u></u>	lll		l <u> </u>	l <u>l</u>	l <u></u> l	111-1	.	II
<u> </u>	ll		lll	11	l <u></u> l	ll	111-1		II
		<u> </u>							1_1
	<u> </u>				<u> </u>		1_1_1-1-1		11
	<u> </u>			l <u></u> l			.		11
1 1 1				1 1	1 1	1 1	1 1 1-1		1 1
	<u> </u>				<u> </u>		<u> </u>		<u> </u>
					ll	ll	<u> </u>		

											MENT (CONT)				
		15		16		17	18	19	<u>HILDREN AGE</u> 20	21	22	23	24	25	26
PID of child				ccination histo			ot available inquire received.	from respondent.	For DPT, OPV	Has [NAME] had diarrhoea	Where did [NAME] seek	Has [NAME] been ill with	Where did [NAME] seek	Has [NAME] had an illness	Where did [NAME] seek
[FROM PREVIOUS	again	ination	Vaco drop mou	Polio cine (OPV), s in the th usually	vac giv thig	T, a ecination en in the gh or tock,	Measles injection, a shot in the arm at the age of 9 months or	Has [NAME] ever received a Vitamin A dose?	Has [NAME] received a Vitamin A dose in the last 6 months?	in the past 2 weeks?	treatment for this condition?	fever in the last 2 weeks?	treatment for this condition?	with a cough at any time in the last 2 weeks?	treatment for this condition?
PAGE]	arm o	or shoulder h usually es a scar?	_	weeks after ? =1	usu san the	ally at the ne time as OPV?	older, to prevent measles? YES=1 NO=2	YES=1 NO=2>> Q22	YES=1 NO=2	YES=1 NO=2>> <i>Q23</i>	PUBLIC FACILITY=1 PVT FACILITY=2 PHARMACY=3 TRADITIONAL HEALER=4 DID NOT SEEK=5	YES=1 NO=2>> Q25	PUBLIC FACILITY=1 PVT FACILITY=2 PHARMACY=3 TRADITIONAL HEALER=4 DID NOT SEEK=5	YES=1 NO=2>>GO TO SECTION 14B	PUBLIC FACILITY=1 PVT FACILITY=2 PHARMACY=3 TRADITIONAL HEALER=4 DID NOT SEEK=5
		Number of doses		Number of doses		Number of doses									

SECTION 13A: CHILD HEALTH AND DEVELOPMENT (CONT...)

[TO BE COMPLETED FOR CHILDREN AGED 0 MONTHS TO 60 MONTHS ONLY]

These questions are to be asked to the birth mother of each child. If birth mother no longer alive or not member of household, ask caregiver identified in O3 about birth mother.

	I nese questions are t	to be asked to the	e birth mother	of each child. If birth m	otner no longer alive	e or not member	of nousehold, ask c	aregiver identified in Q3 about b	oirth mother.
	27	28	29	30	31	32	33	34	35
PID of	Did you seek anyone for	How many	How many	During any of your	During this	During this	During this	When [NAME] was born, was s/he	Who assisted with the delivery of
child	antenatal care for this	months	times did you	antenatal care was any	preganancy were	pregnancy	pregnancy did you	very large, larger than average,	[NAME]?
	pregnancy? If so from whom	pregnant were	receive	of the following done at	you offered	were you given	take any drugs to	average, smaller than average, or	[If respondent says no one, probe to
	did you seek care?	you when you	antenatal care	least once?	counselling and	an injection in	keep you from	very small?	determine whether any adults were
		first received	during this	[RECORD CODE OF	testing for the virus	the arm to	getting malaria?	V.LARGE1	present at the delivery.]
	[RECORD ALL THAT	antenatal care	pregnancy?	ALL THAT APPLY]	that causes AIDS?	prevent the		LARGER THAN AVERAGE	[Record all persons mentioned]
[FROM	APPLY.]	for this		1. Were you weighed?		baby from		2	1. DOCTOR
PREVIOUS	1. DOCTOR	pregnancy?		2. Was your height		getting tetanus,		AVERAGE3	2. NURSE
PAGE]	2. NURSE			measured?	YES1	that is,		SMALLER THAN	3. MIDWIFE
	3. MIDWIFE	[MONTHS]		3. Was your blood	NO2	convulsion	YES1	AVERAGE4	4. CLINICAL OFFICER
	4. CLINICAL OFFICER			pressure measured?		after birth?	NO2	VERY SMALL5	5. TRADITIONAL BIRTH
	5. TRADITIONAL BIRTH			4. Did you give a urine				DK9	ATTENDANT
	ATTENDANT			sample?		YES1			6. RELATIVE/FRIEND
	6. OTHER(SPECIFY)			5. Did you give a blood		NO2			7. OTHER(SPECIFY)
	NO ONE9>> Q33			sample?					
<u> </u>									
]									
						1			

SECTION 13B: CHILD HEALTH AND DEVELOPMENT (CONT...)

[TO BE COMPLETED FOR CHILDREN AGED 3 TO 7 YEARS ONLY]

INSTRUCTIONS: This module is to be administered to all mothers or caretakers (see Household Roster) who care for a child between the ages of 3-7 that lives with them (see Household Roster). A separate row should be used for each eligible child. Ask each child's mother or caretaker separately about the child.

caen emua s II	nother or caretaker se	paratety about the c		ı	1		1	1	1	1	1	1
	1	2	3	4	5	6	7	8	9	10	11	12
PID of child	PID for child's biological mother [FROM ROSTER]>>Q3	PID for child's primary care- taker if biological mother not in	How many children's books or pictures do you have for [NAME]?	when s/he is at hon	ne. [If the responde	hings [NAME] plays with ent says 'YES' to any what the child plays with to	activities with [N	NAME]? If 'YE	R=2 OTHER=3 N	T	ME].	ı
[FROM ROSTER]	IF THE BIOLOGICAL MOTHER IS NOT A MEMBER OF THE HOUSEHOLD ENTER 88 AND GO TO 02	household. [FROM ROSTER]	Write number. If more than 10 write 10.	Does s/he play with homemade toys such as dolls, cars, or other toys made at home? YES=1 NO=2 DK=9	Does s/he play with toys from a shop or manufactured toys? YES=1 NO=2 DK=9	Does s/he play with household objects such as bowls or pots, or objects found outside such as sticks, rocks, animal shells or leaves? YES=1 NO=2 DK=9	Read books to or looked at pictures with [NAME]?	Told stories to [NAME]?	Sang songs to [NAME] or with NAME including lullabies?	Took [NAME] outside the home, compound, yard or enclosure?	Played with [NAME]?	Named, counted or drew things with [NAME]?
	00 10 02											

						EALTH AND I						
	13	14	15	16	PLETED FOR 17	R CHILDREN A	19	YEARS ONLY 20	21	22	23	24
PID of child	have to leave the ho clothes or other reas	king care of children use to go shopping, wash ons and have to leave how many days in the	I would like to a	sk you some questi ated to several aspe	ons about the health	h and development of development.	your child. Childre		and learn at the same			I
	past week was [NA]	ME]:	Can [NAME]	Can [NAME]	Does [NAME] know the	Does [NAME] pick up a small	Is [NAME] sometimes too	Does [NAME] follow simple	When given something to	Does [NAME] get along well	Does [NAME] kick, bite, or hit	Does [NAME] get distracted
[FROM PREVIOUS PAGE]	Left alone for more than one hour?	Left in the care of another child, that is, someone less than 10 years old, for more than one hour?	name at least ten letters of the alphabet?	four simple, popular words?	name and recognize the symbol of all numbers from 1 to 10.	object with two fingers, like a stick or a rock from the ground?	sick to play?	directions on how to do something correctly?	do, is [NAME] able to do it independently?	with other children?	other children or adults?	easily?
	No. of days DK=99	No. of days DK=99										

			SECTION 14	: REPRODUC	TION- ALL	FEMALI	Е МЕМВЕ	ERS AGE	S 12-49			
			To be asked for a									
	1	2	3	4	5	6	,	7	8	9	10	11
PID	Is [NAME]	How many	Have you sought anyone for	How many	Has	Did the last s		Has	How many	How many children	Has [NAME]	What is the
	pregnant now?	months pregnant	antenatal care for this	months pregnant	[NAME]	pregnancy er	nd after	[NAME]	children to	to whom [NAME]	ever given birth	total number
		is [NAME]?	pregnancy? If so from	was [NAME]	ever had a	2005?		ever	whom	has given birth are	to a boy or girl	of children
[from			whom did you seek care?	when she first	pregnancy			given	[NAME has	alive but do not live	who was born	that have
roster]				received antenatal	that			birth?	given birth are	with you?	alive but later	died?
			[RECORD ALL THAT	care for this	miscarried,	IF YES, EN			currently		died?	
			APPLY.]	pregnancy?	was aborted,	(MM) and Y	YEAR		living with	av		
	YES=1	[Total number of	1 DOCTOR	D (O) VIII VO	or ended in a	(YYYY)			you?	[Number]	IF NO, PROBE:	OHD OFFI
	NO=2	completed	1. DOCTOR	[MONTHS]	stillbirth?	IE NO ENG	EED OO				Any baby who	[NUMBER]
	>> Q5 UNSURE=9 >> Q5	months]	2. NURSE 3. MIDWIFE			IF NO, ENT FOR MONT		YES=1			cried or showed signs of life but	
	UNSURE=9 >>Q3	If less than a	4. CLINICAL OFFICER	If "DON'T		9999 FOR Y		NO=2			did not survive?	
		month record	5. TRADITIONAL BIRTH	KNOW" enter 99	YES=1	9999 FOR 1	EAR	>>Q10	[Number]		ala noi survive:	
		'00'.	ATTENDANT	KNOW emer 99	NO=2			>>Q10	[Number]		YES=1	
		00.	6. OTHER		>>NEXT	Month	Year				NO=2>>END	
			NO ONE9>>Q5		FEMALE						NO-2>>END	

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

				Purch	ases			Own Production	n	Gifts,	Food for Work, Re	elief Food
	Ì		Q1	Q2	Q3		Q4	1	Q5	Q6	,	Q7
	Ī		Did this household purchase/	During the last 4 weeks, how	How many [UNITS]	of [ITEM] did	During the last 4 we	eks, how many	How much would this	During the last 4 we	eks, how many	How much would this
			consume/receive [ITEM]	much did your household spend on	your household pu		[UNITS] of own produ	duced [ITEM] did	[ITEM] cost if you	[UNITS] of [ITEM] di	id your household	[ITEM] cost if you
			during the last 4 weeks?	[ITEM]? (IN TOTAL)	amount?		your household cons	sume?	were to buy it?	receive without payn	nent?	were to buy it?
		Read Out	Yes 1							1		
		Fill in Per Row	No 2									
			>>Next Item									
			Don't Know 3									
			>>Next Item	Value in Kwacha	Quantity	Unit Code	Quantity	Unit Code	Value in Kwacha	Quantity	Unit Code	Value in Kwacha
(Peres	Is—During Last	1 Wooks	Value III Kwaciia	Quantity	Offit Code	Quantity	Offit Code	Value III Kwaciia	Quantity	Unit Code	Value III KWaciia
1		Maize grain unst										
2		Maize grain unsi Maize grain shel				 	-	 			 	
3		Breakfast mealie				1					 	-
<u> </u>			rifiedi					 			 	
4		Roller meal				1					 	
5		Hammer mealie			ļ	1		<u> </u>				
6		Pounded maize	meal									
1	7	Cost of milling										
			Q1	Q2	Q3		Q4		Q5	Q6		Q7
			Did this household purchase/	During the last 2 weeks, how	How many [UNITS]		During the last 2 we		How much would this	During the last 2 we	eks, how many	How much would this
			consume/receive [ITEM]	much did your household spend on	your household pu	rchase for that	[UNITS] of own produ	luced [ITEM] did	[ITEM] cost if you	[UNITS] of [ITEM] di	d your household	[ITEM] cost if you
			during the last 2 weeks?	[ITEM]? (IN TOTAL)	amount?		your household cons	sume?	were to buy it?	receive without payn	nent?	were to buy it?
		Read Out	Yes 1									
		Fill in Per Row	No 2									
			>>Next Item Don't Know 3									
ΙğΙ			>>Next Item									
FREQUENT FOODS			>>Next Item	Value in Kwacha	Quantity	Unit Code	Quantity	Unit Code	Value in Kwacha	Quantity	Unit Code	Value in Kwacha
	3	Millet										
		Sorghum, unshe	lled									
		Sorghum, shelle										
H H		Rice, shelled	u									
I —		Rice, unshelled						 				
		Wheat/Flour				 		 	+			
_		Bread/Bread roll	c			\vdash		 	+			
_		Buns/scones	J			 	 	 	+			1
_						 		 	+		 	1
_		Fritters	ad itama									
		Other cereal/bre										1
_			uring Last 2 Weeks						1			
_		Sweet potatoes,				 		 	1		 	
		Sweet potatoes,			<u> </u>	 		 	<u> </u>		 	
		Potatoes, unpee	i			ļ		_	<u> </u>			<u> </u>
_		Potatoes, peeled				<u> </u>					<u> </u>	
		Cassava (tubers)								<u> </u>	
2	23	Cassava (flour)			1	1				ı [İ	
		Other roots/tube				· · · · · · · · · · · · · · · · · · ·	///	· · · · · · · · · · · · · · · · · · ·	79			

Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units
B90	90 KG Bag	B10	10 KG Bag	T5	5 Litre Tin	GR	Gram	BOT500	Bottle 500 ML	BP	BP	CU	Cup	BD	Bundle
B50	50 KG Bag	T20	20 Litre Tin	Р	Piece/Number	LT	Litre	BOT750	Bottle 750 ML	HP	Heap	GAL	Gallon	MD 3/	Meda
B25	25 KG Bag	T10	10 Litre Tin	KG	Kilograms	ML	Millilitre	BOT2.5	Bottle 2.5 LT	PL	Plate	BK	Bucket	OT	Other

				Purch	ases			Own Production	n	Gifts, I	ood for Work, Re	elief Food
			Q1	Q2	Q3		Q4		Q5	Q6		Q7
			Did this household purchase/ consume/receive [ITEM] during the last 2 weeks?	During the last 2 weeks, how much did your household spend on [ITEM]? (IN TOTAL)	How many [UNITS] your household pur amount?	of [ITEM] did chase for that	During the last 2 wee [UNITS] of own produ your household cons	uced [ITEM] did	How much would this [ITEM] cost if you were to buy it?	During the last 2 we [UNITS] of [ITEM] did receive without paym	d your household	How much would this [ITEM] cost if you were to buy it?
		Read Out Fill in Per Row	Yes 1 No 2 >>Next Item 2 Don't Know 3									
			>>Next Item									
				Value in Kwacha	Quantity	Unit Code	Quantity	Unit Code	Value in Kwacha	Quantity	Unit Code	Value in Kwacha
	Pulse		—During Last 2 Weeks			1	1		I	T		l
	25	Fresh beans (ex unshelled										
	26	Fresh beans (ex shelled										
	27	Sunflower, shelle										
		Soya beans, she	elled									
		Dried beans										
	30	Groundnuts, uns										
	31	Groundnuts, she										
		Bambara, shelle										
	33 34	Cowpeas, unshe Peas	elled									
SC	35	Other pulses, leg	aumoc									
100		tables—During										
FREQUENT FOODS		Onions	Last 2 WCCRS				1					
l E	37	Tomatoes										
EDI	38	Cabbages										
FR	39	Rape										
	40	Okra							_			
	41	Pumpkin leaves										
	42	Cassava leaves										
		Kalembula										
	44	Bondwe										
	46	Impwa										
	46	Cucumber										
	47	Green beans										
	48	Carrots										
	49	Pumpkin										
	50	Green Maize										
	51	Other Vegetable	S									

Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units
B90	90 KG Bag	B10	10 KG Bag	T5	5 Litre Tin	GR	Gram	BOT500	Bottle 500 ML	BP	BP	CU	Cup	BD	Bundle
B50	50 KG Bag	T20	20 Litre Tin	Р	Piece/Number	LT	Litre	BOT750	Bottle 750 ML	HP	Heap	GAL	Gallon	MD 3F	Meda
B25	25 KG Bag	T10	10 Litre Tin	KG	Kilograms	ML	Millilitre	BOT2.5	Bottle 2.5 LT	PL	Plate	BK	Bucket	OT	Other

Fruits— 52 Or 53 Ap	ead Out ill in Per Row	Did this househo consume/receive during the last 2 Yes No >>Next Item Don't Know >>Next Item Weeks	ld purchase/ e [ITEM]	Purch Q2 During the last 2 weeks, how much did your household spend on [ITEM]? (IN TOTAL) Value in Kwacha	Q3 How many [UNITS]	chase for that	Q4 During the last 2 wee [UNITS] of own produ your household cons	eks, how many uced [ITEM] did	Q5 How much would this [ITEM] cost if you were to buy it?	During the last 2 wee [UNITS] of [ITEM] did receive without paym	l your household	O7 How much would this [ITEM] cost if you were to buy it?
Fruits— 52 Or 53 Ap	ead Out ill in Per Row -During Last 2 ranges pples langoes	Did this househo consume/receive during the last 2 Yes No >>Next Item Don't Know >>Next Item	ld purchase/ e [ITEM] weeks?	much did your household spend on [ITEM]? (IN TOTAL)	How many [UNITS] your household pur amount?	chase for that	[UNITS] of own produ	uced [ITEM] did	How much would this [ITEM] cost if you	[UNITS] of [ITEM] did	l your household	[ITEM] cost if you
Fruits— 52 Or 53 Ap	-During Last 2 ranges pples langoes	No >>Next Item Don't Know >>Next Item	2	Value in Kwacha	Quantity				,			
Fruits — 52 Or 53 Ap	-During Last 2 rranges pples langoes	>>Next Item Don't Know >>Next Item		Value in Kwacha	Quantity							
52 Or 53 Ap	-During Last 2 rranges pples langoes	Don't Know >>Next Item	3	Value in Kwacha	Quantity							
52 Or 53 Ap	-During Last 2 ranges pples langoes			Value in Kwacha	Quantity							
52 Or 53 Ap	ranges pples langoes	Weeks		Value III Kwaciia	Qualitity	Unit Code	Quantity	Unit Code	Value in Kwacha	Quantity	Unit Code	Value in Kwacha
52 Or 53 Ap	ranges pples langoes	Weeks				Unit Code	Quantity	Unit Code	value III Kwaciia	Quantity	Utilit Code	Value III KWaCiia
53 Ap	pples langoes				1							
	langoes											
34 101										-		-
	ananas											
	awpaws											
	/atermelons											
	emons											
	ineapples											ļ
	ears											
	uavas											
	vocados											
	ther fruits											
	Ouring Last 2 V	Veeks										
6 4 Ka	apenta (fresh)											
65 Ka	apenta (frozen)											
66 Ka	apenta (dried/sı	moked)										
를 67 Br	ream (fresh)											
	ream (frozen)											
69 Br	ream (dried/ sm	ioked)										
70 Bu	uka Buka (fresh	1)										
	uka Buka (froze											
	uka Buka (dried											
	ther fish (fresh)											
	ther fish (frozer											
75 Ot	ther fish (dried/	smoked)										
76 Ot	ther fish and fis	h products										
Meat an	nd Poultry I—D	uring Last 2 We	eks									
	hicken (fresh)											
78 Ch	hicken (frozen)											
	hicken (dried/sr	noked)										
80 Ot	ther poultry (fre	sh)										
	ther poultry (fro											
	ther poultry (dri											

Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units
B90	90 KG Bag	B10	10 KG Bag	T5	5 Litre Tin	GR	Gram	BOT500	Bottle 500 ML	BP	BP	CU	Cup	BD	Bundle
B50	50 KG Bag	T20	20 Litre Tin	Р	Piece/Number	LT	Litre	BOT750	Bottle 750 ML	HP	Heap	GAL	Gallon	MD 36	Meda
B25	25 KG Bag	T10	10 Litre Tin	KG	Kilograms	ML	Millilitre	BOT2.5	Bottle 2.5 LT	PL	Plate	BK	Bucket	OT	Other

			Purch	ases			Own Production	n	Gifts,	Food for Work, Re	elief Food
		Q1	Q2	Q3		Q4		Q5	Qé		Q7
	Look 2 Wooks	Did this household purchase/	During the last 2 weeks, how	How many [UNITS]	of [ITEM] did	During the last 2 wer	eks, how many	How much would this	During the last 2 we	eks, how many	How much would this
	Last 2 Weeks	consume/receive [ITEM] during the last 2 weeks?	much did your household spend on [ITEM]? (IN TOTAL)	amount?	chase for that	[UNITS] of own produced your household cons		[ITEM] cost if you were to buy it?	[UNITS] of [ITEM] di receive without payr		[ITEM] cost if you were to buy it?
	Read Out	Yes 1	[ITEM]: (IN TOTAL)	amount:		your nouscrioid cons	diffe:	were to buy it:	receive without payr	icit:	were to buy it:
		No 2									
		>>Next Item									
		Don't Know 3 >>Next Item									
		- Tronchom	Value in Kwacha	Quantity	Unit Code	Quantity	Unit Code	Value in Kwacha	Quantity	Unit Code	Value in Kwacha
Mea	nt and Poultry I—I	During Last 2 Weeks (continued)	•							
83	Beef (fresh)										
84	Beef (frozen)										
85	Beef (dried/smo										
		During Last 2 Weeks				T		1			.
86	Pork (fresh)										
87	Pork (frozen)	N									
88	Pork (dried/smo										
89	Goat meat (frest Goat meat (dried										
90	Sheep meat (fre										
92	Sheep meat (fro										
93	Sheep meat (dri										
94	Game meat (free										
OF	Game meat (fro:										
96	Game meat (drie										
요 97	Other meat	,									
FREQUENT FOODS 98 99 100	ry Products and E	ggs—During Last 2 Weeks									
98	Milk (fresh)										
₩ <u>99</u>	Milk (powdered,	excl baby milk)									
100	Eggs										
101											
	Other dairy prod										
	S—During Last 2	Weeks				1	T			T	
	Butter										
	Margarine Peanutbutter										
	Other fats (excl	cooking oil)									
		Ouring Last 2 Weeks									
	Sugar	Juring Last 2 Weeks									
	Honey										
109											
	Cocoa and choo	olate									
	Cremora										
	Other sweets										

Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units
B90	90 KG Bag	B10	10 KG Bag	T5	5 Litre Tin	GR	Gram	BOT500	Bottle 500 ML	BP	BP	CU	Cup	BD	Bundle
B50	50 KG Bag	T20	20 Litre Tin	Р	Piece/Number	LT	Litre	BOT750	Bottle 750 ML	HP	Heap	GAL	Gallon	MD 37	Meda
B25	25 KG Bag	T10	10 Litre Tin	KG	Kilograms	ML	Millilitre	BOT2.5	Bottle 2.5 LT	PL	Plate	BK	Bucket	OT	Other

				Purch	ases			Own Production	n	Gifts, I	ood for Work, Re	elief Food
			Q1	Q2	Q3		Q4		Q5	Q6		Q7
			Did this household purchase/ consume/receive [ITEM] during the last 2 weeks?	During the last 2 weeks, how much did your household spend on [ITEM]? (IN TOTAL)	How many [UNITS] your household pur amount?	of [ITEM] did chase for that	During the last 2 we [UNITS] of own prod your household cons	uced [ITEM] did	How much would this [ITEM] cost if you were to buy it?	During the last 2 we [UNITS] of [ITEM] direceive without payn	d your household	How much would this [ITEM] cost if you were to buy it?
		Read Out Fill in Per Row	Yes 1 No 2 >>Next Item Don't Know 3 >>Next Item									
				Value in Kwacha	Quantity	Unit Code	Quantity	Unit Code	Value in Kwacha	Quantity	Unit Code	Value in Kwacha
	Non-Al	Icoholic Bever	rages—During Last 2 Weeks		,	,	•		'	•		•
	114 T	Tea leaves/tea	bags									
			lend, or instant)									
		Drinking chocol	ate/Milo/cocoa									
		Juice										
		Soft drinks										
		Mineral water										
		Munkoyo										
		Maheu										
		Other nonalcoh										
			—During Last 2 Weeks	1				l .	1	1		T
	123											
DS		Vines										
FREQUENT FOODS		Ciders										
1 =		Clear beer										
ΙĒ		Opaque beer										
EO		Traditional brew								***************************************		
F.		Other alcoholic										
		Food—During										
	V	Baby foods (e.g vitasoy, baby m	ilk, etc.)									
			Cafés, Restaurants—During Las	t 2 Weeks								
		Food from kiosk estaurants	ks, cafés,									
	Other I	Food and Bevo	erages—During Last 2 Weeks									
	132	Other foods and (specify)										
			cco—During Last 2 Weeks				<u> </u>					4
		Cigarettes										
		Говассо										
Ь	<u> </u>		L	J.		ı	1	1	1	1		

Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units
B90	90 KG Bag	B10	10 KG Bag	T5	5 Litre Tin	GR	Gram	BOT500	Bottle 500 ML	BP	BP	CU	Cup	BD	Bundle
B50	50 KG Bag	T20	20 Litre Tin	Р	Piece/Number	LT	Litre	BOT750	Bottle 750 ML	HP	Heap	GAL	Gallon	MD 38	Meda
B25	25 KG Bag	T10	10 Litre Tin	KG	Kilograms	ML	Millilitre	BOT2.5	Bottle 2.5 LT	PL	Plate	BK	Bucket	OT	Other

	NOTE	E: CHANGE OF REFERENCE PERIOD	Purch	ases			Own Production	n	Gifts,	Food for Work, Re	elief Food
		Q8	Q9	Q10		Q11		Q12	Q1		Q14
		Last 4 Weeks Did this household purchase/ consume/receive [ITEM] during the last 4 weeks?	During the last 4 weeks , how much did your household spend on [ITEM]? (IN TOTAL)	How many [UNITS] your household pur amount?		During the last 4 wee [UNITS] of own produyour household cons	uced [ITEM] did	How much would this [ITEM] cost if you were to buy it?	During the last 4 we [UNITS] of [ITEM] d receive without pays	id your household	How much would this [ITEM] cost if you were to buy it?
		Read Out									
			Value in Kwacha	Quantity	Unit Code	Quantity	Unit Code	Value in Kwacha	Quantity	Unit Code	Value in Kwacha
	Non	Frequent Foods—During Last 4 Weeks			,			 			
OTHER FOOD	135	Salt									
15 G	136	Spices] [
		Cooking oil									
	Othe	er Nonfrequent Expenditure—During Last 4 W	/eeks								
	138	Charcoal									
	139	Firewood									
ISI	140	Rent of dwelling									
1 😤	141	Water and sewage charges									
DIT	142	Electricity									
ĔN	143	Paraffin									
HOUSING EXPENDITURES I	144	Diesel fuel (for lighting and cooking only)									
HOUSI	145	Home repairs (plumbing, painting, stove repairs, etc.)									
	146	Cable/pay TV (DSTV, My TV, SATELITE, ZNBC, etc.)									

Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units
B90	90 KG Bag	B10	10 KG Bag	T5	5 Litre Tin	GR	Gram	BOT500	Bottle 500 ML	BP	BP	CU	Cup	BD	Bundle
B50	50 KG Bag	T20	20 Litre Tin	Р	Piece/Number	LT	Litre	BOT750	Bottle 750 ML	HP	Heap	GAL	Gallon	MD 30	Meda
B25	25 KG Bag	T10	10 Litre Tin	KG	Kilograms	ML	Millilitre	BOT2.5	Bottle 2.5 LT	PL	Plate	BK	Bucket	OT	Other

					Purchases	Gifts
			Q8		Q9	Q14
		Last 4 Weeks	Was [ITEM] purchased received during the las 4 weeks?		During the last 4 weeks , how much did your household spend on [ITEM]? (IN TOTAL)	During the last 4 weeks, what was the value of [ITEM] your household received without payment (IN TOTAL)?
		Read Out Fill in Per Row	Yes No >>Next Item Don't Know >>Next Item	1 2 3	Value in Kwacha	Value in Kwacha
	147	Garbage collect	ion (solid waste)		value iii kwaciia	Value III Kwaciia
	148	Gas	ion (solid Waste)			
3.2	149		or cooking/lighting			
HOUSING 2	150	Coal, excl charc	0 0 0			
9	151	Batteries, light b				
		matches, candle				
	152	Other housing e	xpenses			
		I			1	1
	153	Bath/handwashi	3 1			
	154	Laundry deterge				
	155	Toothpaste and	toothbrushes			
	156	Sanitary towels				
	157	Toilet paper and				
	158	etc.)	up, petroleum jellies,			
HYGIENE	159	Hair care (e.g., p conditioning, sha etc.)	perming, braiding, ampooing; haircuts,			
HYG	160	Laundry service washing at the la	(e.g., dry cleaning, aundry, etc.)			
	161	Baby diapers				
	162	cleansers, hand	c (excl soap and nts) (e.g., Ajax, uids or pastes, toilet y andy, air fresheners, ner cleaning agents,			
	163	Insecticides				
	164	Other hygiene e	xpenses	1		

						Purchases	Gifts
			Q8			Q9	Q14
		Last Month	Was [ITEM] purchased received during the last month?		h h	Ouring the last 4 weeks, ow much did your ousehold spend on [ITEM]? IN TOTAL)	During the last 4 weeks, what was the value of [ITEM] your household received without payment (IN TOTAL)?
		Read Out	Yes	1			
		Fill in Per Row	No 2 >>Next Item				
			Don't Know >>Next Item	3			
						Value in Kwacha	Value in Kwacha
		ic Transportation					
	165	· · · · · · · · · · · · · · · · · · ·	to and from work				
	166	Public transport boarding school	to/from school incl and abroad				
7	167	Other public trar church, visits)	nsport (e.g., to/from				
PO	Priva	te Transportatio	n				
TRANSPORT	168	Petrol/diesel/oil					
TR/	169	Vehicle mainten	ance and repairs				
	170	Motorbike repair	s (tires/tubes, oil, etc.)				
	171	Bicycle repairs (etc.)	tires, tubes, solution,				
	172	Boat/canoe repa	nirs				
	173	Other private tra	nsport				
Z	174	Mobile phones (connection fees, air				
COMMUNICATION	175		s (connection fees,				
MMUN	176	Internet (connectees)	tion and subscription				
8	177	Postal expenses	3				
	178	Other communic	cation expenses				

Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units
B90	90 KG Bag	B10	10 KG Bag	T5	5 Litre Tin	GR	Gram	BOT500	Bottle 500 ML	BP	BP	CU	Cup	BD	Bundle
B50	50 KG Bag	T20	20 Litre Tin	Р	Piece/Number	LT	Litre	BOT750	Bottle 750 ML	HP	Heap	GAL	Gallon	MD 40	Meda
B25	25 KG Bag	T10	10 Litre Tin	KG	Kilograms	ML	Millilitre	BOT2.5	Bottle 2.5 LT	PL	Plate	BK	Bucket	OT	Other

					Purchases	Gifts
			Q8		Q9	Q14
		Last 4 Weeks	Was [ITEM] purchased received during the last 4 weeks?		During the last 4 weeks, how much did your household spend on [ITEM]? (IN TOTAL)	During the last 4 weeks, what was the value of [ITEM] your household received without payment (IN TOTAL)?
		Read Out	Yes	1		
		Fill in Per Row	No >>Next Item	2		
			Don't Know >>Next Item	3		
					Value in Kwacha	Value in Kwacha
	179	watching soccer	e.g., cinema, disco/ /boxing, video hire, nment centers, e.g., xcl alcohol)			
ER	180	Domestic servar	nts			
OTHER	181	Stationary (e.g., paper, envelope education)	copies, printing, s, excl stationery for			
	182	Typing services,	filling in official forms			
	183	Other expenses				

	NOTE	E: CHANGE OF F	REFERENCE PERIOD)	Purchases	Gifts		
			Q15		Q16	Q17		
		Last Year	Did this household purchase/pay for or r the following items do the last year (2009)?	uring	During the last year, (2009) how much did your household spend on [ITEM]? (IN TOTAL)	During the last year, what was the value of [ITEM] your household received without payment (IN TOTAL)?		
		Read Out Fill in Per Row	Yes No >>Next Item Don't Know >>Next Item	1 2 3				
	Edica		`		Value in Kwacha	Value in Kwacha		
	_			a ana <i>3</i> ra	School Terms of 2010	4 - 1 1		
	184	and boarding fe	el examination fees,		1st term	1st term		
		and boarding le	cs)		2nd term	2nd term		
	405	0	I I/DTA		3rd term	3rd term		
	185	Contributions to	school/PTA		1st term	1st term		
					2nd term	2nd term		
					3rd term	3rd term		
	186	Private tuition			1st term	1st term		
					2nd term	2nd term		
					3rd term	3rd term		
	187	Textbooks			1st term	1st term		
Z					2nd term	2nd term		
EDUCATION					3rd term	3rd term		
l /	188		y (exercise, books,		1st term	1st term		
		pens, pencils, ru			2nd term	2nd term		
		etc.)	ets, textbooks, paper,		3rd term	3rd term		
			er school requisites (e s, mazoe, biscuits, tinn					
	189		(incl shoes, socks,		1st term	1 st term		
		ties, materials, t	ailoring charges)	ĺ	2nd term	2nd term		
				ĺ	3rd term	3rd term		
	190	Other education	expenses		1st term	1 st term		
			emonies, tuck shop		2 ^{nd term}	2 ^{nd term}		
		boarding and lo	money for students, dging for students,		3rd term	3rd term		
		remittances to s	tuaents, etc.)					

Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units
B90	90 KG Bag	B10	10 KG Bag	T5	5 Litre Tin	GR	Gram	BOT500	Bottle 500 ML	BP	BP	CU	Cup	BD	Bundle
B50	50 KG Bag	T20	20 Litre Tin	Р	Piece/Number	LT	Litre	BOT750	Bottle 750 ML	HP	Heap	GAL	Gallon	MD 41	Meda
B25	25 KG Bag	T10	10 Litre Tin	KG	Kilograms	ML	Millilitre	BOT2.5	Bottle 2.5 LT	PL	Plate	BK	Bucket	OT	Other

					Purchases	Gifts
			Q15		Q16	Q17
		Last Year	Did this household purchase/pay for or the following items d last year (2009)?		During the last year , (2009) how much did your household spend on [ITEM]? (IN TOTAL)	During the last year, what was the value of [ITEM] your household received without payment (IN TOTAL)?
		Read Out	Yes	1	(IN TOTAL)	payment (in TOTAL):
		Fill in Per Row	No	2		
		7 111 111 7 61 7 (61)	>>Next Item			
			Don't Know >>Next Item	3		
			>>ivext item		Value in Kwacha	Value in Kwacha
	191	Purchase of med	dicines		value in Rwacha	Value III Kwacila
	192	Fees for doctors				
	193	Fees for nurses.				
	194	Fees for dentists	3			
Ξ	195	Fees for hospita	l stays			
НЕАСТН	196	Fees for health a	,			
뽀	197	Fees for tradition	nal healers			
	198	Payments to hos	spital/health center/			
		surgery	•			
	199	Pre-payment scl				
	200	Other health exp	oenses			
	201	Treatment tablet	te chamicale			
ER	201	etc.	is, chemicais,			
WATER	202	Other water trea	tment			
>						
	In also	-l' OlH-' C	hara Danalar Fra	leadler of Lan		
	203	Chitenges	noes, Repairs – Exc	luding Lat	undry, Excluding School Unifo	orms
	203	Children's clothi	na			
5	204	Men's clothing	ny			
l €	206		ng (excl Chitenges)			
CLOTHING	207	Fabric/material	ig (exci critteriges)			
0		Tailoring charge	S			
	209	Footwear (e.g., s				
		patapata, sofias)				
						· · · · · · · · · · · · · · · · · · ·
- S	210	Loan repayment				
FINANCIAL SERVICES	211	Contributions (cl etc.)	nurch, mosque,			
SER!	212	Insurance (car, I	ife, health)			
	213	Funerals, gifts, o	dowries			
		<u> </u>				

Section 11B: Remittances

					Purchases	Gifts
			Q18		Q19	Q20
		Last Year During the last year did your household remittances in cash kind?		d send	During the last year, (2009) how much did your household spend on cash remittances []?	During the last year , what was the value of remittances paid in-kind []?
		Read Out Fill in Per Row	Yes No >>Next Item Don't Know >>Next Item	1 2 3		
					Value in Kwacha	Value in Kwacha
			CODE:			
	In To	tal				
REMITTANCES	215	To persons in r Zambia (excl a household)	ural areas of ny member of the			
REMIT	216	To persons in u Zambia (excl a household)	urban areas of ny member of the			
	217	To persons out	side Zambia			
	217	To persons out	side Zambia			

Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units
B90	90 KG Bag	B10	10 KG Bag	T5	5 Litre Tin	GR	Gram	BOT500	Bottle 500 ML	BP	BP	CU	Cup	BD	Bundle
B50	50 KG Bag	T20	20 Litre Tin	Р	Piece/Number	LT	Litre	BOT750	Bottle 750 ML	HP	Heap	GAL	Gallon	MD 43	Meda
B25	25 KG Bag	T10	10 Litre Tin	KG	Kilograms	ML	Millilitre	BOT2.5	Bottle 2.5 LT	PL	Plate	BK	Bucket	OT	Other