

02/21/12

University of Dar es Salaam

The World Bank

**AFYA NA MAENDELEO
KAGERA HEALTH AND DEVELOPMENT SURVEY**

**HOUSEHOLD QUESTIONNAIRE
WAVE 1**

STRICTLY CONFIDENTIAL

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SURVEY INFORMATION

CLUSTER: _____

HOUSEHOLD

ROSTER

HEAD OF HOUSEHOLD: _____

ADDRESS (OR DESCRIPTION): _____

FIRST ROUND OF SURVEY

INTERVIEWER: _____	DATE: _____	_____	_____	_____
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DWELLING YES..1 NO...2 (►SUPERVISOR) ☐ IS THE HEAD OF YES..1 NO...2 (►SUPERVISOR) ☐
FOUND? HOUSEHOLD THE SAME?

NAME OF NEW HEAD: _____

RELIGION OF HEAD: MUSLIM.....1 PROTESTANT.....3 TRADITIONAL.....5
CATHOLIC.....2 OTHER CHRISTIAN.....4 OTHER.....6

HEAD'S TRIBE: MHAYA.....1 MHANGAZA.....3 KISHUBI.....5 OTHER (SPECIFY).....7
MNYAMBO.....2 MSUBI.....4 KIZINZA.....6

INTERVIEW CONDUCTED IN:	KISWAHILI.....1	KIHANGAZA.....4	<input type="checkbox"/>	INTER- PRETER?	YES:1	<input type="checkbox"/>
	ENGLISH.....2	ISIBUTO.....5			NO.:2	
	KHAYA.....3	OTHER (SPECIFY): 6				

REMARKS:

VERIFICATION OF THE QUESTIONNAIRE, ROUND ONE

SUPERVISOR: _____	DATE: _____			
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REMARKS:

REINTERVIEW BY SUPERVISOR? YES..1
NO...2

THIS HOUSEHOLD RE-PLACES HOUSEHOLD NO:		THIS HOUSEHOLD WILL BE REPLACED BY NO:		REASON: MOVED.....1 REFUSED.....2	
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DATA ENTRY, ROUND ONE

OPERATOR: _____		DATE:			
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REMARKS:

SUPERVISION OF PRINTOUTS, ROUND ONE

SUPERVISOR: _____		DATE: _____	
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REMARKS:

SECOND ROUND OF SURVEY

► **PROPOSED DATE:**

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INTERVIEWER: _____ **DATE:** _____

REMARKS:

VERIFICATION OF QUESTIONNAIRE, ROUND TWO

SUPERVISOR: _____ **DATE:** _____

REMARKS:

REINTERVIEW BY SUPERVISOR? YES..1 NO...2

DATA ENTRY, ROUND TWO

OPERATOR: _____		DATE:		
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REMARKS:

SUPERVISION OF PRINTOUTS, ROUND TWO

SUPERVISOR: _____ **DATE:** _____

REMARKS: _____

O B S E R V A T I O N S

ROUND 1

ROUND 2

SUMMARY OF SURVEY RESULTS

SECTION		INTERVIEWER								SUPERVISOR		CORRECTED IN OFFICE..1 CORRECTED DURING SECOND ROUND.....2 NOT CORRECTED.....3
		FIRST VISIT				CHECK-UP VISIT				INTERVIEWER SATISFACTORY.....1 TO BE COMPLETED:2 TO BE REDONE.....3	OPERATOR SATISFACTORY....1 CORRECTIONS....2	
		DATE			RESULT	DATE			RESULT			
		DAY	MONTH	YEAR	COMPLETE.....1 PARTIAL.....2 NOT APPLICABLE:3	DAY	MONTH	YEAR	COMPLETE.....1 PARTIAL.....2			
FIRST ROUND	1											
	2											
	3											
	4											
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SECOND ROUND	11											
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	13											
	14											
	15											
	16											
	17											
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	19											
	20											

SECTION 1. PART A. HOUSEHOLD ROSTER

RESPONDENT: INAPENDEKEZWA MKUU WA KAYA. IKIWA HAYUPO TAFUTA MTU MHINGINE WA KUMWAKILISHA KATIKA KUMJIBIA MASWALI. MWAJILISHI LAZIMA AWE NI MWANAKAYA AMBAYE ATAWEZA KUTOA TAARIFA KUHUSU WANAKAYA WENGINE.

INTERVIEWER _____

RESPONDENT: _____ ID CODE:

1-3. Ningependa kutengenesha orodha kamili ya watu wote ambao wanaishi na kula pamoja katika makao haya.

- * Kwanza, ningependa unipe majina ya watu wote wa familia yako ambao wana uhusiano wa karibu wanaoishi na kula pamoja katika makao haya. Hawa ni, mkuu wa kaya, mke au wake (au mme au mwenzi, na watoto wake kwa kufuatia mpangilio wa miaka yao.

WAKATI WOTE ANZA KUMUANDIKA MKUU WA KAYA (ID CODE 01) AKIFUATIWA NA MKEWE/MUMEWE HALAFU WATOTO KWA KUFUATIA MPANGILIO WA UMRI WAO. KAMA KUNA MKE ZAIDI YA MMOJA, ANZA NA YULE WA AILI AKIFUATIWA NA WATOTO WAKE, HALAFU MKE MHINGINE AKIFUATIWA NA WATOTO WAKE NA KUENDELEA

ANDIKA JINA, MWANAMKE/MWANAMME(SEX), NA UHUSIANO WAO NA MKUU WA KAYA KWA KILA MTU.

- * Tafadhali niambie majina ya watu wengine wenye uhusiano na mkuu wa kaya au na mke/mme wake ambao wanaishi na kula hapa kwa kawaida, pamoja na familia zao pia.

ANDIKA JINA, MWANAMKE/MWANAMME(SEX), NA UHUSIANO WAO NA MKUU WA KAYA.

- * Tafadhali nipe majina ya watu wengine wanaoishi na kula pamoja humu nyumbani lakini hawana undugu na mkuu wa kaya au mke/mme wake. Kwa mfano, wafanyakazi wa nyumba na wengine.

ANDIKA JINA, MWANAMKE/MWANAMME(SEX), NA UHUSIANO WAO NA MKUU WA KAYA.

- * Kuna mtu yeyote ambaye anaishi na kula hapa, lakini hayupo? Kwa mfano, yupo masomoni, likizo au ameenda kumtembelea mtu au amekwenda kutafuta matibabu?

ANDIKA JINA, MWANAMKE/MWANAMME(SEX), NA UHUSIANO WAO NA MKUU WA KAYA.

FOR EACH PERSON LISTED IN QUESTION 1, ASK QUESTIONS 4-11.

4-11. Sasa ningependa kupata taarifa kuhusu kila mtu uliyemtaja

IF THE RESPONDENT HAS ANY DIFFICULTY WITH HIS AGE OR DATE OF BIRTH (QUESTION 6), USE THE CALENDAR OF EVENTS TO MAKE AN ESTIMATE.

12. DETERMINE HOUSEHOLD MEMBERSHIP.

HOUSEHOLD ROSTER

FOR HOUSEHOLD MEMBERS, WRITE "X" AND COPY AGE IN YEARS IN COLUMN 1 ON THE ROSTER.

SECTION 1. HOUSEHOLD ROSTER

IDENTIFICATION CODE		2	3	4	5		6	7	8	9	10	11	12
SEX		RELATIONSHIP TO HEAD	Unaweza kufambia siku [NAME] aliyozaliwa?	WRITE THE DATE OF BIRTH CALCULATE PERSON'S AGE, ASK THE RESPONDENT TO CONFIRM IT IN QUES. 6		[NAME] ana umri gani? YEARS IF 5 YEARS OR OVER. YEARS AND MONTHS IF <5 YEARS. IF <14 YRS >10		Hali ya ndoa ya [NAME] ni ipi? Kwa wakati huu... READ TO THE RESPONDENT Ameoa (Ameolewa).1 Hawala.....2 Ametalikiwa.3(>10) Wametengana.4(>10) Mjane.....5 (>10) Hajaopa Hajaolewa..6 (>10)	Mwenzi wa [NAME] anaishi katika kaya hii? YES..1 NO..2 (>10)	COPY THE IDENTIFICATION CODE OF THE PARTNER (IF MORE THAN ONE WIFE, THE 1st CODE OF THE FIRST) ID CODE	Kwa miezi mingapi katika kipindi cha miezi 12 iliyopita amekuwa nje ya kaya hii? (kuanzia.. MONTH/YEAR) IF 9 MTHS OR LESS, > 12 MONTHS	Unategemea kwamba [NAME] atakuwa akiishi hapa nitakaporudi baada ya miezi sita kuanzia leo? YES.....1 NO.....2	HOUSEHOLD MEMBER? CHECK THE CRITERIA AT RIGHT YES..1 NO...2 NEXT PERSON
MALE....1		HEAD.....1 WIFE OR HUSBAND.....2 SON/DAUGHTER.....3 GRANDCHILD.....4 FATHER OR MOTHER.....5 SISTER OR BROTHER.....6 NIECE OR NEPHEW.....7 SON/DAUGHTER-IN-LAW.....8 BROTHER/SISTER-IN-LAW.....9 FATHER/MOTHER-IN-LAW.....10 OTHER RELATIVE OF HEAD OR OF HIS/HER SPOUSE.....11 SERVANT/MAKUBALIANO.....12 SERVANT/MKATABA.....13 TENANT/BOARDER.....14 OTHER UNRELATED PERSON.....15		YES..1 NO..2 (>6)	DAY	MTH	YEAR	YRS.	MOS.				

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INSTRUCTIONS FOR CODING HOUSEHOLD MEMBERSHIP:

- HEAD IS ALWAYS A MEMBER
- FOLLOWING ARE NOT MEMBERS:
 - SERVANT/MKATABA (CODE 13, QUESTION 3)
 - TENANT/BOARDER (CODE 14, QUESTION 3)
 - IF ANSWER TO QUESTION 11 IS NO (CODE 2)
- EVERYONE ELSE IS A MEMBER.

SECTION 2: CHILDREN RESIDING ELSEWHERE

1. Kuna mwanakaya yeyote ambaye ana watoto wa umri wowote ambao hawaishi hapa kwenye kaya?
PROBE FOR ADULT CHILDREN

YES.....1 (► ON THE ATTACHED CARD PLEASE LIST
ALL THE NAMES OF THE CHILDREN RESIDING ELSEWHERE)
NO.....2 (► SECTION 3)

☐

KWA KILA MTOTO AMBAYE AMEORODHESHA KWENYE SWALI LA PILI MUULIZE MASWALI 3-17																
CHILD ID CODE	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	
	SEX? MALE1 FEMALE2	[NAME].. ana umri gani? sasa? YEARS	Baba mzeei wa [NAME].. anaishi katika kaya hii? YES...1 NO...2 (> 7)	COPY THE FATHER'S ID CODE. ID CODE	Baba mzeei wa [NAME].. yuko hai? YES...1 NO...2	Mama mzeei wa [NAME].. anaishi katika kaya hii? YES...1 NO...2 (> 10)	COPY THE MOTHER'S ID CODE. ID CODE	Mama mzeei wa [NAME].. yuko hai? YES...1 NO...2	[NAME] amewahi kwenda shule? YES...1 NO...2 (> 14)	[NAME].. anasoma shule sasa? YES...1 NO...2	Ni darasa gani la juu kabisa [NAME]... amemaliza? CODES NONE ADULTED KORANIC P1 P2 P3 P4 P5 P6 P7 P8 S1 S2 S3 S4 U1 U2 U3 U4 U5 U6 U7 U8 GRADE	[NAME].. anaishi wapi? Anaishi..... Hapa kijijini/ mji.....1 Kijiji kingine mkoani Kagera...2 Mji mwingine mkoani Kagera...3 Der-Es-Salaam...4 Mji mwingine Tanzania.....5 Kijiji kingine Tanzania.....6 Nchi nyingine.....8 Si juu.....8	Je.. [NAME] anafanya kazi? YES...1 NO (> 17)	Je.. [NAME].. anafanya kazi wapi? Anafanya kazi.... Serikalini/Katika Chama/ Shirika la Umma Katika Kampuni/Shirika la binafsi.....2 Biashara yake binafsi.....3 Mkulima Kazi nyingine (Eleza).....5 IF MORE THAN ONE JOB MENTIONED, WRITE MOST IMPORTANT	Kwa nini [NAME] anaishi mahali pengine? LIST THE MAJOR REASON SO CHILD MAY ATTEND SCHOOL.1 SO CHILD MAY OBTAIN MEDICAL CARE.....2 OTHERS ARE BETTER ABLE.....2 TO CARE FOR HIM.....3 PARENTS ARE TOO SICK TO CARE FOR HIM.....4 LIVING WITH OTHER PARENT WHO HAS CUSTODY.....5 OTHER (SPECIFY).....6 ▶ NEXT CHILD	
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**SECTION 3: INFORMATION ON THE
PARENTS OF HOUSEHOLD MEMBERS**

**TO BE ASKED ABOUT ALL
HOUSEHOLD MEMBERS**

SECTION 3. PART A. INFORMATION ON FATHER

IDENTIFICATION CODE	1 Baba wa [NAME] anaishi katika koya hii? YES...1 NO...2 (>3)	2 COPY THE IDENTIFICATION CODE FOR THE FATHER [> 9]	3 Baba wa [NAME] yuko hapa? YES...1 (> 5) NO....2	4 Baba wa [NAME] alifariki katika kipindi cha mizi 12 iliyopita? YES...1 NO....2 [> 6]	5 Baba wa [NAME] anaishi wapi sasa? SAME PLACE AS HOUSEHOLD..1 VILLAGE ELSEWHERE IN KAGERA...2 TOWN ELSEWHERE IN KAGERA...3 DAR ES SALAAM...4 OTHER URBAN AREA IN TANZANIA...5 OTHER RURAL AREA IN TANZANIA...6 OTHER COUNTRY...7 DON'T KNOW...8	6 Baba wa [NAME] alisoma? YES...1 NO...2 (>8)	7 Ni darasa gani la juu kabisa alilomaliza? CODES NONE ADULTED KORANIC P1 P2 P3 P4 P5 P6 P7 P8 S1 S2 S3 S4 A1 A2 U1 U2 U3 U4 U5 U6 U7 U8 GRADE	8 Baba ya [NAME] amefanya au alifanya kazi wapi wakati mwingi wa maisha yake? Serikeleni/katika chama/shirika la Umma...1 Katika kampuni/shirika la binafsi...2 Biashara yake binafsi...3 Mkulima...4 Kazi nyingine (eleza)...5
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SECTION 3. PART B. INFORMATION ON MOTHER

IDENTIFICATION CODE	9	10	11	12	13	14	15	16	17	18	19	
	Mama mzazi wa [NAME] anaishi katika kaya hii? YES...1 NO...2 (->11)	COPY THE MOTHER'S IDENTIFICATION CODE ▶ NEXT HHOLD MEMBER	Mama mzazi wa [NAME] yuko hai? YES...1 (->13) NO...2	Mama mzazi wa [NAME] alifika katika kipindi cha miezi 12 iliyopita? YES...1 NO...2 ▶ 14	Mama mzazi wa [NAME] anaishi wapi? SAME PLACE AS HOUSEHOLD...1 VILLAGE ELSEWHERE IN KAGERA...2 TOWN ELSEWHERE IN KAGERA...3 DAR ES SALAAM...4 OTHER URBAN AREA IN TANZANIA...5 OTHER RURAL AREA IN TANZANIA...6 OTHER COUNTRY...7 DON'T KNOW...8	Mama mzazi wa [NAME] alisoma? YES...1 NO...2 (->16)	NI darasa gani la juu kabisa alilomaliza? CODES NONE ADULTED KORANIC P1 P2 P3 P4 P5 P6 P7 P8 S1 S2 S3 S4 A1 A2 U1 U2 U3 U4 U5 U6 U7 U8 GRADE	Mama ya [NAME] amefanya au alifanya kazi wapi wakati mwingi wa maisha yake? Serikalin/katika chama/ Shirika la Umma...1 Katika kampuni/shirika la binafsi...2 Biashara yake binafsi...3 Mkulima...4 Kazi nyingine (eleza)...5	IS THIS PERSON LESS THAN 15 YEARS OLD? YES..1 NO...2 (-> NEXT MEMBER)	ARE BOTH [NAME'S] PARENTS ABSENT? SEE QUESTIONS 1 AND 9 YES...1 NO...2 (-> NEXT MEMBER)	Mme[shi] na [NAME] katika kaya yako kwa muda gani? YRS MTHS	
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SECTION 4. MAIN ACTIVITIES OF THE HOUSEHOLD

RESPONDENT:HEAD OF HOUSEHOLD

1. Katika kipindi cha miezi 12 iliyopita, kuna yeyote katika kaya yako ambaye alifanya kazi katika shamba/bustani au amekuwa na shamba/bustani?

YES.....1

NO.....2 (► 3)

2. Ni nani anayejua zaidi kuhusu shughuli zote za kilimo za walioko katika kaya yako?

NAME:

ID CODE:

3. Katika kipindi cha miezi 12 iliyopita, kuna mwanakaya yeyote ambaye amekuwa na mifugo (amefuga mifugo)?

YES.....1

NO.....2 (► 5)

4. Ni nani anayejua zaidi kuhusu shughuli zote za mifugo za waliko katika kaya yako?

NAME:

ID CODE:

5. Katika kipindi cha mjezi 12 iliyopita kuna mwanakaya yeyote ambaye amemiliki vifaa vyote au baadhi ya vifaa vya uvuvi?

YES.....1

NO.....2 (► 7)

- 6. Ni nani anayejua zaidi kuhusu shughuli zote za uvuvi za walioko katika kaya yako?**

NAME:

ID CODE:

7. Katika kipindi cha miezi 12 iliyopita, kuna mwanakaya yeyote ambaye aliyemiliki yeye mwenyewe au na mtu mwingine vitu vifuatavyo?

Ujuzi?

YES...1

NO. . . . 2

KiWanda?

YES...1

NO. . . . 2

Huduma?

YES...1

NO...2

Bioshara?

YES.....1

NO.2

**Uteolomu wa
kujiajiri?**

a YES...1

NO. 2

IF ALL ANSWERS ARE "NO" ► 10

IF ANY ANSWERS ARE YES ► 8

ORDER	8. Ni nani anayejua zaidi kuhusu mapato au gharama za ...[NAME OF BUSINESS, ENTERPRISE, ETC....]? kipindi cha miezi 12 iliyopita?					9. Ni nani anayejua zaidi kuhusu mapato au gharama za ...[NAME OF BUSINESS, ENTERPRISE, ETC....]? NAME		ID CODE
	Ujuzi	Biashara	Kiwanda	Huduma	Utegemezi wa kujitaji	OFFICE USE		
1	MAKE A COMPLETE LIST BEFORE GOING TO 9. LIST MOST IMPRTANT FIRST							
2								
3								
4								
5								

- 10. Kwa kawaida ni nani aneyekwenda sokoni kununua chakula cha kaya?**

NAME:

ID CODE:

▶ SECTION 5

SECTION 5: EDUCATION

**TO BE ASKED ABOUT ALL
HOUSEHOLD MEMBERS
7 YEARS AND OLDER**

SECTION 5. EDUCATION

IDENTIFICATION CODE	1	2	3	4	5	6	7	8	9	10	11	12	13	14
	[NAME] anaweza kuso- ma gaze- ti? YES.1 NO..2 (>3)			[NAME] amewahi kwenda shule au anahud- huria shule sasa? YES...1 NO....2 (>SECTION 6)	Ni darasa gani la juu kabisa aliomaliza? NONE ADULTED KORANIC P1 P2 P3 P4 P5 P6 P7 P8 S1 S2 S3 S4 A1 A2 U1 U2 U3 U4 U5 U6 U7 U8 GRADE	Pamoja na hayo amwahi kupata Ufundi au utsala- mu wote? YES...1 NO...2 (> 8)	Amepata mafunzo ya zaidi kwa maka mingapi? YEARS IF MORE THAN ONE YEAR MONTHS IF LESS THAN ONE YEAR YEARS MONTHS	[NAME] anahu- dhuria shule sasa? YES...1 NO...2 (> 13)	Shule ya (name) ya misho aliyohudhu- ria ilikuwa Ya seri- kali?.....1 Ya binafsi?2 Ya dini?...3	Ni masaa mangapi hasa [NAME] alikaa shuleni siku ya..... ...[DAY OF WEEK]? RECORD THE NUMBER OF HOURS ATTENDED EACH DAY MON TUE WED THU FRI SAT SUN TOT	Kwa kawaida masaa [CITE NUMBER] ndiyo anayokaa shuleni kwa wiki? YES....1 (> 14) NO.....2	Kwa nini [NAME] hakuhudhuria shuleni kwa masaa ya kawaida katika siku saba zilizopita? OWN ILLNESS.....1 TO CARE FOR ILL FAMILY MEMBER.....2 TO WORK AT HOME.....3 TO WORK OUTSIDE HOME.....4 PUBLIC OR RELIGIOUS HOLIDAY.....5 VACATION.....6 FUNERAL/MOURNING...7 OTHER.....8 > 14	Katika kipindi cha miezi iliyopita ...[NAME] amehudhuria shule? YES...1 NO....2 (> SECTION 6)	Shule ya [NAME] ni umbali gani kutoka hapa? DISTANCE CODE FOOT....1 METER...2 KM.....3 MILE....4 DIST- ANCE CODES
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SECTION 5. EDUCATION (CONT.)

IDENTIFICATION CODE	15 Je anaishi kwenye kaya hii wakati anahuduria shule? YES...1 NO...2 (> 18)	16 Kwa kawaida [NAME] anakwenda je shuleni? ON FOOT...1 BICYCLE...2 CAR...3 BUS...4 BOAT...5 OTHER...6	17 [NAME] anatumia muda gani kufika shuleni kwa njia anayotumia? MINS HRS	18 Kwa miezi 12 iliyopita kaya yako imetumia kiasi gani cha fedha kwa ajili ya elimu ya [NAME]? IF NOTHING WAS SPENT, WRITE ZERO. DO NOT INCLUDE CONTRIBUTIONS MADE BY OTHERS. IF THE RESPONDENT CAN ONLY GIVE A TOTAL AMOUNT, WRITE TOTAL IN COLUMN H								19 [NAME] amewahi kupata msaada kwa ajili ya gharama za elimu katika miezi 12 iliyopita? YES...1 NO...2 (> 23)	20 Je huo msaada umepatikana kutoka kwa..... COOPERATIVE UNION.....1 SCHOOL.....2 COMMUNITY FUNDS.....3 CHURCH/RELIGIOUS GROUP.....4 GOVERNMENT.....5 OTHER PRIVATE ORGANIZATION (SPECIFY:.....)6 OTHER (SPECIFY:.....)7	21 Kwa nini alipewa msaada? FAMILY UNABLE TO PAY FEES..1 MERIT/COMPETITION..2 OTHER..3	22 Hiyo misada ya gharama za elimu ilikuwa na thamani ya kiasi gani katika kipindi cha miezi 12 iliyopita? ▶ 23 NEXT PAGE AMOUNT
	AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT			
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SECTION 5. EDUCATION (END)

IDENTIFICATION CODE	23	24	25								26	27	28
	Kuna mtu yeyote ambaye siyo wa kaya yako amemlipia [NAME] gharama zozote zile kwa ajili ya shule? YES...1 NO...2 (> 26)	Mtu huyu ana uhsiano gani na [NAME] anayesoma? IF MORE THAN ONE BENEFACTOR, CITE THE ONE WHO CONTRIBUTED THE MOST. PARENT.....1 SIBLING.....2 GRANDPARENT.....3 AUNT/UNCLE.....4 OTHER RELATIVE...5 UNRELATED PERSON.....6	Hawa watu wengine wamechangia kiasi gani kwa ajili ya [NAME] katika kipindi cha miezi 12 iliyopita? IF NOTHING WAS SPENT, WRITE ZERO. IF RESPONDENT CAN ONLY GIVE A TOTAL, WRITE TOTAL IN COLUMN H. _____								[NAME] alipata msaada usiokuwa wa fedha kwa ajili ya elimu yake katika kipindi cha miezi 12 iliyopita? Kwa mfano, sare za shule, vitabu na vifaa vya shule, au chakula cha bure? YES...1 NO...2 (> SECTION 6)	Alipata msaada kutoka wapi? COOPERATIVE UNION.....1 SCHOOL.....2 COMMUNITY FUNDS.....3 CHURCH/RELIGIOUS GROUP.....4 GOVERNMENT.....5 OTHER PRIVATE ORGANIZATION...6 OTHER (SPECIFY).....7	Thamani ya msaada hiyo katika kipindi cha miezi 12 iliyopita ilikuwa kiasi gani? SECTION 6 AMOUNT
			A. Mchango katika kuerdeleza ukuzaaji wa elimu ya msingi kwa wote (UPE)? AMOUNT	B. Sare za shule na michezo? AMOUNT	C. Vitabu na vifaa vya shule? AMOUNT	D. Usafiri kwenda shuleni? AMOUNT	E. Chakula na malazi? AMOUNT	F. Ada ya shule? AMOUNT	G. Mengineyo (vyama vya shule na mafunzo ya ziada, fedha ya matumizi)? AMOUNT	H. JUMLA AMOUNT			
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SECTION 6: HEALTH

**TO BE ASKED ABOUT ALL
HOUSEHOLD MEMBERS**

SECTION 6 HEALTH PART A: ACUTE ILLNESS IN THE PAST FOUR WEEKS

IDENTIFICATION CODE	1 Umewahi kuugua au kuumia katika kipindi cha wiki 4 zilizopita? kwa mfano, umewahi kukohoa, kupata mafua, kuharisha, kuumia kwa ajali au ugonjwa wowote? YES, ILLNESS...1 YES, INJURY....2 NO.....3 (> SECTION 6B) IF BOTH ILLNESS AND INJURY, USE ILLNESS CODE	2 IF ILLNESS: Ugonjwa huu ulianza muda gani uliopita? IF INJURY: Jeraha hili lilitokea muda gani uliopita? IF MORE THAN ONE, ASK ABOUT MOST RECENT TIME DAY....3 UNIT: WEEK....4 MONTH....5 YEAR....6 AMOUNT OF TIME TIME UNIT	3 DID THIS ILLNESS BEGIN LESS THAN SIX MONTHS AGO? YES...1 (>7) NO....2	4 Katika kipindi cha wiki 4 zilizopita umewahi kupata ugonjwa mwingine au jeraha lingine? YES.....1 NO.....2 (>SECTION 6B)	5 IF ILLNESS: Ugonjwa huu ulianza muda gani uliopita? IF INJURY: Jeraha hili lilitokea muda gani uliopita? IF MORE THAN ONE, ASK ABOUT MOST RECENT TIME DAY....3 UNIT: WEEK....4 MONTH....5 YEAR....6 AMOUNT OF TIME TIME UNIT	6 DID THIS ILLNESS BEGIN LESS THAN SIX MONTHS AGO? YES....1 NO.....2 (> SECTION 6B)	7 Uliugua au ulikuwa na jeraha hili kwa muda wa siku ngapi? (SINCE DATE THAT ILLNESS BEGAN) DAYS	8 IF ILLNESS: Unaweza ukaelezea dalili za ugonjwa ulizokuwa nazo wakati ulikuwa ukugua ugonjwa huu? Ulikuwa ukiumwa na nini? IF INJURY: Aina gani ya Jeraha uliyokuwa nayo? RECORD UP TO FIVE SYMPTOMS MENTIONED BY THE RESPONDENT. DIARRHEA (ACUTE).....1 DIARRHEA (CHRONIC, 1 MONTH OR MORE).....2 WEIGHT LOSS (MAJOR).....3 FEVER (ACUTE).....4 FEVER (RECURRING).....5 SKIN RASH.....6 WEAKNESS.....7 SEVERE HEADACHE.....8 FAINTING.....9 CHILLS (FEELING HOT AND COLD).....10 VOMITING.....11 COUGH.....12 PRODUCTIVE COUGH.....13 COUGHING BLOOD.....14 PAIN ON PASSING URINE.....15 GENITAL SORES.....16 MENTAL DISORDER.....17 ABDOMINAL PAIN.....18 SORE THROAT.....19 DIFFICULTY BREATHING.....20 BURN.....21 FRACTURE.....22 WOUND.....23 CHILDBIRTH.....24 OTHER (SPECIFY).....25 SYMPTOM #1 SYMPTOM #2 SYMPTOM #3 SYMPTOM #4 SYMPTOM #5						
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SECTION 6A HEALTH (CONT.)

IDENTIFICATION CODE	9 Ni kwa muda wa wa siku ngapi hukuuzeza kufanya kazi zako za kawaida kutokana na ugonjwa hili? IF NONE, WRITE 0 AND >12. DAYS	10 IS THIS PERSON 15 OR OLDER? YES..1 NO...2 (>12)	10A Ulipoku-mgonjwa au ulipopata jeraha hili, kuna mtu yeyote aliyeku-saidia? YES..1 NO...2 (>12)	11 Wakati wa ugonjwa wako, ni nani katika kaya yako aliyekuwa akikufanyia kazi zako? IF NO ONE WRITE 0 ID CODE	12 Kuna yeyote aliyekonwa kwa ajili ya matibabu ya ugonjwa huu au jeraha hili? Kwa mfano, daktari, Nesi, Mgonjwa wa jadi, Mfanasia, au mtealimu mwingine wa aya? YES..1 NO...2 (>54)	13 Ni wapi ulipotafuta matibabu kwa mara ya kwanza? HOSPITAL.....1 HEALTH CTRE...2 DISPENSARY...3 CLINIC.....4 PHARMACY.....5 HOME OF THE PERSON CONSULTED...6 (>15) PATIENT'S HOME.....7 (>19) OTHER.....8 (SPECIFY:)	14 Je hii sehemu ni mali ya serikali au binafsi? PUBLIC..1 MISSION..2 PRIVATE..3 DESIGNATED..4	15 Ni nani aliyekutibu katika sehemu hii? DOCTOR.....1 NURSE.....2 MEDICAL ASSISTANT...3 RURAL MEDICAL AIDE.....4 TBA.....5 PHARMACIST...6 LAB TECHNICIAN...7 TRADITIONAL HEALER.....8 SPIRITUALIST...9 OTHER.....10 (SPECIFY:)	16 Hii sehemu iko umbali gani kutoka hapa? DISTANCE CODE FOOT....1 METER...2 KM.....3 MILE....4 DIS-TANCE CODE	17 Ulitumia usafiri gani katika sehemu hii? ON FOOT..1 BICYCLE..2 CAR.....3 BUS.....4 BOAT....5 OTHER...6 (SPECIFY)	18 Ilikuchukua muda gani kufika katika sehemu hii? TIME ONE WAY HRS MIN	19 Je ilibidi ulale katika sehemu hii kwa sababu ya ugonjwa huu au jeraha hili? YES...1 NO...2 (>22)	20 Kwa siku ngapi? NIGHTS	21 Umelipa kiasi gani au utalipa kiasi gani kwa pamoja kwa kukaa katika sehemu hii? AMOUNT	22 Ulikwenda mara ngapi katika sehemu hii kwa ajili ya ugonjwa huu au jeraha hili? TIMES	23 Uliipa kiasi gani kwa matibabu yote uliyopata katika sehemu hii kwa ajili ya ugonjwa huu au jeraha hili? IN CASH AND IN KIND EXCLUDE COST OF MEDICINES IF FREE WRITE ZERO AMOUNT	24 Je ulipata matibabu sehemu nyingine yoyote kwa ajili ya ugonjwa huu au jeraha hili? YES..1 NO...2 (>54)
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SECTION 6A HEALTH (CONT.)

IDENTIFICATION CODE	25	26	27	28		29	30		31	32	33	34	35	36
	Ni wapi ulipotafuta matibabu kwa mara ya pili? HOSPITAL.....1 HEALTH CENTRE.....2 DISPENSARY.....3 CLINIC.....4 PHARMACY.....5 HOME OF PERSON CONSULTED.....6 (27) PATIENT'S HOME.....7 (31) OTHER.....8 (SPECIFY:_____)	Je hii sehemu ni mali ya serikali au binafsi? PUBLIC..1 MISSION..2 PRIVATE..3 DESIGNATED...4	Ni nani aliyekutibu katika sehemu hii? DOCTOR.....1 NURSE.....2 MEDICAL ASSISTANT...3 RURAL MEDICAL AIDE.....4 TBA.....5 PHARMACIST...6 LAB TECHNICIAN..7 TRADITIONAL HEALER.....8 SPIRITUALIST..9 OTHER (SPECIFY:_)..10	Hii sehemu iko umbali gani kutoka hapa? DISTANCE CODES FOOT...1 METER...2 KM.....3 MILE...4		Ulitumia usafiri gani kufika katika sehemu hii? ON FOOT..1 BICYCLE..2 CAR.....3 BUS.....4 BOAT.....5 OTHER...6 (SPECIFY)	Ilikuchukua muda gani kufika katika sehemu hii? TIME ONE WAY		Je ilibidi ulale katika sehemu kwa sababu ya ugonjwa huu au jeraha hili? YES..1 NO (34)2	Kwa siku ngapi?	Umelipa au utalipa kiasi gani kwa pamoja kwa kukaa/kulazwa katika sehemu hii?	Ulikwenda mara ngapi katika sehemu hii kwa ajili ya ugonjwa huu au jeraha hili?	Ulilipa kiasi gani kwa matibabu yote uliyoyapata katika sehemu hii kwa ajili ya ugonjwa huu au jeraha hili? IN CASH AND IN KIND EXCLUDE COST OF MEDICINES. IF FREE WRITE ZÉRO. AMOUNT	Je ulipata matibabu sehemu nyingine yoyote kwa ajili ya ugonjwa huu au jeraha hili? YES..1 NO (34)2
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SECTION 6A HEALTH (CONT.)

IDENTIFICATION CODE	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53
	Ni wapi ulipotafuta matibabu kwa mara ya tatu? HOSPITAL.....1 HEALTH CENTRE...2 DISPENSARY.....3 CLINIC.....4 PHARMACY.....5 HOME OF THE PERSON CONSULTED.....6 PATIENT'S HOME.....7 OTHER (SPECIFY).....8	Je hii sehemu ni mali ya serikali au ya binafsi? PUBLIC..1 MISSION.2 PRIVATE.3 DESIGNATED..4	Nani aliyekutibu katika sehemu hii? DOCTOR.....1 NURSE.....2 MEDICAL ASSISTANT....3 RURAL MEDICAL AIDE..4 TBA PHARMACIST.....5 LAB TECHNICIAN...7 TRADITIONAL HEALER.....8 SPIRITUALIST...9 OTHER (SPECIFY).....10	Hii sehemu iko umbali gani kutoka hapa? DISTANCE CODE FOOT...1 METER...2 KM.....3 MILE...4	Utitumia usafiri gani kufika katika sehemu hii? ON FOOT..1 BICYCLE..2 CAR.....3 BUS.....4 BOAT.....5 OTHER (SPECIFY).....6	Ilikuchukua muda gani kufika katika sehemu hii? TIME ONE WAY HRS MIN	Je ilibidi ulale katika sehemu hii kwa sababu ya ugonjwa huu au jeraha hili? YES....1 NO...2 (>46)	Kwa siku ngapi?	Umelipa au utalipa kiasi gani kwa pamoja kwa kukaaa/kulazwa katika sehemu moja?	Ulikwenda mara ngapi katika sehemu hii kwa ajili ya ugonjwa huu au jeraha hili?	Ulilipa kiasi gani kwa matibabu yote uliyopata katika sehemu hii kwa ajili ya ugonjwa au jeraha hili? IN CASH AND IN KIND EXCLUDE COST OF MEDICINES. IF FREE, WRITE ZÉRO.	Je ulipata matibabu sehemu nyingine yoyote kwa ajili ya ugonjwa huu au jeraha hili? YES...1 NO...2 (> 54)	Ni sehemu nyingine ngapi ulizotafuta matibabu?	Ni kiasi gani kilichotumika katika kutafuta matibabu sehemu nyingine kwa ajili ya ugonjwa huu au jeraha hili?	Mbali na kulazwa hospitali ulikokwisha taja, je ulilazwa sehemu nyingine yoyote kwa ajili ya ugonjwa huu au jeraha hili?	Kwa siku ngapi?	Umelipa au utalipa kiasi gani kwa pamoja kwa ajili ya kulazwa katika sehemu hizi zote?
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ILLNESS CODES

AIDS/HIV.....	1
ASTHMA.....	2
BILHARZIA/ SHISTOSOMIASIS.....	3
CANCER.....	4
DIARRHEA.....	5
DYSENTERY.....	6
FRACTURE.....	7
GONORRHEA.....	8
INTESTINAL PARASITES.....	9
MALARIA.....	10
MALNUTRITION (KWASHIORKOR/ MARASHUS).....	11
MEASLES.....	12
MENINGITIS.....	13
POISONING.....	14
POLIO.....	15
SYPHILIS.....	16
TETANUS.....	17
TUBERCULOSIS.....	18
TYPHOID.....	19
URINARY INFECTION.....	20
WITCHCRAFT.....	21
OTHER STD (SPECIFY).....	22
OTHER ILLNESS (SPECIFY).....	23
OTHER INJURY (SPECIFY).....	24
DON'T KNOW.....	25

SECTION 6A HEALTH (CONT.)

IDENTIFICATION CODE	54 Je ilibidi ulale kitandani bila kufanya kazi yoyote ulipokuwa na ugonjwa huu au jeraha hili?	55 Mara nyingi ni nani aliyekuwa akiuguza katika kaya hii?	56 Ni kiasi gani kimetumika kwa pamoja kwa ajili ya usafiri wakati wa ugonjwa huu au jeraha hili?	57 Ni kiasi gani kimetumika kwa pamoja kwa ajili ya madawa wakati wa ugonjwa huu?	58 Kuna gharama zako zozote zilizolipwa na mwaliri?	59 Je ulipokea msaada wowote kutoka nje ya kaya yako kusa- idia malipo ya matibabu ya ugonjwa huu au jeraha hili?	60 Ulipokea kiasi gani kutoka nje ya kaya yako?	61 Je kuna sehemu ya msaada huu ambao itabidi ulipe?	62 Ni kiasi gani itabidi kilipwe?	63 Bado unaugua ugonjwa huu au jeraha hili mpaka leo?	64 Je ugonjwa wako uliwahi kugunduliwa na mtaalamu wa aya?	65 Ni ugonjwa gani ambao mtaalamu alifikiri ulikuwa nao/unao?		66 Unafikiri unaumwa na ugonjwa gani?		67 Je hili limekuwa tatizo la kiafya linaloku- sumbuwa mara kwa mara?	68 Umekuwa ukisumbu- liwa na hali hii mara ngapi kwa muda wa miezi 12 iliyopita?
	YES...1 NO...2 (>56)	IF NO ONE, WRITE 0.	AMOUNT	AMOUNT INCLUDING TRADITIONAL MEDICINES	YES.....1 NO.....2	YES...1 NO....2 (> 63)	AMOUNT	YES...1 NO...2 (> 63)	AMOUNT	YES....1 NO.....2	YES...1 NO...2 (>66)	SEE ILLNESS CODES ABOVE		SEE ILLNESS CODES ABOVE		YES...1 NO...2 (> 69)	NUMBER OF TIMES
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02																	
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SECTION 6A HEALTH (CONT.)

IDENTIFICATION CODE	69	70	71	72	73	74	75	76
	Je ulikuwa na ugonjwa wowote mwingine au jeraha lolote lingine katika wiki 4 zilizopita?	Ni magonjwa au majeraha mengine mangapi uliyokuwa nayo katika wiki 4 zilizopita?	Uligharimia kiasi gani katika haya magonjwa au majeraha yote katika wiki 4 zilizopita, ukiunilisha gharama za matibabu, madawa, usafiri na gharama nyingine zilizohusiana na magonjwa haya au majeraha haya?	Pamoja na ugonjwa au jeraha uliyotaja katika wiki 4 zilizopita, je umekuwa ukiishi na tatizo lolote la kiafya kwa muda mrefu?	Je umewahi kuharisha kwa muda wa mwezi mmoja au zaidi?	Je umepungua uzito wako katika miezi michache iliyopita?	Je umekuwa na homa ya vipindi kwa muda wa mwezi au zaidi?	Je umekuwa na vipotele vya ngozi kwa mwaka mmoja uliyopita?
	YES...1 NO....2 (SECTION 6B)		EXCLUDE EXPENDITURES INCURRED JOINTLY WITH THE FIRST ILLNESS	PROBE: Kwa muda zaidi ya miezi sita YES.....1 (SECTION 6B QUESTION 2) NO.....2	YES...1 NO....2	YES..1 NO...2	YES....1 NO.....2	YES....1 NO....2
		NUMBER OF ILLNESSES:	AMOUNT					SECTION 7
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	02							
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09								
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11								
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ILLNESS CODES

AIDS/HIV.....	1
ASTHMA.....	2
BILHARZIA/ SHISTOSOMIASIS.....	3
CANCER.....	4
DIARRHEA.....	5
DYSENTERY.....	6
FRACTURE.....	7
GONORRHEA.....	8
INTESTINAL PARASITES.....	9
MALARIA.....	10
MALNUTRITION (KWASHIORKOR/ MARASMUS).....	11
MEASLES.....	12
MENINGITIS.....	13
POISONING.....	14
POLIO.....	15
SYPHILIS.....	16
TETANUS.....	17
TUBERCULOSIS.....	18
TYPHOID.....	19
URINARY INFECTION.....	20
WITCHCRAFT.....	21
OTHER STD (SPECIFY).....	22
OTHER ILLNESS (SPECIFY).....	23
OTHER INJURY (SPECIFY).....	24
DON'T KNOW.....	25

IDENTIFICATION CODE	1	2		3	4	5					6	7	8	9	10
	Je, umekuwa ukilishi na tatizo lolote la kiafya kwa muda wa zaidi ya miezi sita?	Hili tatizo limeanza muda gani uliopita?		Je, hili tatizo limevahi kugunduliwa na mtaalamu wa afya?	Ni tatizo gani la kiafya mtaalamu alifikiri unalo?	Una dalili gani za ugonjwa?					Uligharamia kiasi gani katika matatizo yote haya kwa muda wa wiki 4 zililopita, ukijumlisha gharama za matibabu, usafiri na gharama nyingine zinazohusiana na matatizo haya?	Je, umewahi kuharisha kwa muda wa mwezi mmoja au zaidi?	Je, umepungua uzito wako katika miezi ya karibuni?	Je umekuwa na homa za vipindi kwa muda wa mwezi au zaidi?	Je umekuwa na vipete vya ngozi kwa mwaka mmoja uliopita?
	YES...1 NO....2 (> 7)	TIME UNIT DAY.....3 WEEK.....4 MONTH.....5 YEAR.....6		YES..1 NO...2 (>5)	SEE ILLNESS CODES ABOVE ▶6	DIARRHEA (ACUTE).....1 DIARRHEA (CHRONIC, 1 MONTH OR MORE).....2 WEIGHT LOSS (MAJOR).....3 FEVER (ACUTE).....4 FEVER (RECURRING).....5 SKIN RASH.....6 WEAKNESS.....7 SEVERE HEADACHE.....8 FADING.....9 CHILLS (FEELING HOT AND COLD).....10 VOMITING.....11 COUGH.....12 PRODUCTIVE COUGH.....13 COUGHING BLOOD.....14 PAIN ON PASSING URINE.....15 GENITAL SORES.....16 MENTAL DISORDER.....17 ABDOMINAL PAIN.....18 SORE THROAT.....19 DIFFICULTY BREATHING.....20 BURN.....21 FRACTURE.....22 WOUND.....23 CHILD BIRTH.....24 OTHER (SPECIFY).....25					EXCLUDE EXPENDITURES INCURRED JOINTLY WITH THE ACUTE ILLNESS	YES....1 NO.....2	YES....1 NO.....2	YES....1 NO.....2	YES.....1 NO.....2
	AMOUNT OF TIME	TIME UNIT		ILLNESS	SYMPTOM #1	SYMPTOM #2	SYMPTOM #3	SYMPTOM #4	SYMPTOM #5	AMOUNT					
01															
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▶ SECTION 7

SECTION 7: ACTIVITIES

**ALL HOUSEHOLD MEMBERS
7 YEARS AND OLDER**

IDENTIFICATION CODE	1 JE MHUSIKA NDIYE ANAYEJIBU MASHALI MWENYEWE?	2 Katika kipindi cha siku saba zilizopita, umewahi kufanya mtu kazi yako kwa mfano mwaliri kiwanda, serikali au mtu yeyote nje ya kaya?	3 Na katika kipindi cha miezi 12 iliyopita?	4 Katika kipindi cha siku saba zilizopita umewahi kufanya kazi katika shamba lako au bustani yako au kwa kaya yako au umefuga mifugo?	5 Na katika kipindi cha miezi 12 iliyopita?	6 Katika kipindi cha siku saba zilizopita, umewahi kufanya shughuli zako binafsi, ama za kaya yako? Kama vile, biashara, uvuvi, shughuli za kiutaalamu kama udaktari, uanasheria na shughuli nyingine binafsi za kibiashara?	7 Na katika miezi 12 iliyopita?	8 LOOK BACK TO QUESTION 2. DID THE RESPONDENT WORK FOR SOMEONE ELSE IN THE PAST SEVEN DAYS?	9 LOOK BACK TO QUESTION 4. DID THE RESPONDENT WORK ON A FAMILY FARM IN THE PAST SEVEN DAYS?	10 LOOK BACK TO QUESTION 6. DID THE RESPONDENT WORK IN HIS OWN OR FAMILY BUSINESS IN THE PAST SEVEN DAYS? YES..1 (➤ PART D) NO...➤ REVIEW THE ANSWERS TO Q. 2,4 AND 6. .IF ANY ANSWERS ARE "YES" YOU HAVE MADE A MISTAKE CORRECT 8-10 .IF ALL THREE ANSWERS ARE "NO" THEN NO.....2	11 Kwa nini haukufanya kazi katika kipindi cha siku saba zilizopita? (MAIN REASON) SICK.....1 HANDICAPPED.....2 DO NOT WANT WORK.....3 (➤PART E) TOO OLD/RETIRED.....4 (➤PART E) STUDENT.....5 (➤PART E) HOUSEWORK.....6 (➤PART E) TOO YOUNG.....7 (➤PART E) ON VACATION.....8 (➤PART E) AWAITING REPLY OF EMPLOYER/AGENCY.....9 (➤PART E) WAITING TO START NEW JOB.....10 (➤PART E) NO WORK EXISTS.....11 (➤PART E) DON'T KNOW HOW TO LOOK FOR WORK.....12 (➤PART E) OTHER REASONS...13 (➤PART E)	12 Katika majisha yako umefanya kazi gani hasa? FARMING.....1 FISHING.....2 TRADER/MERCHANT/SALES.....3 TRANSPORT.....4 CONSTRUCTION.....5 EDUCATION.....6 PROFFESIONAL/ADMIN.....6 HEALTH PROFESSIONAL ADMIN.....7 OTHER PROFFESIONAL/ADMIN.....8 SECRETARY/CLERICAL.....9 FACTORY WORK.....10 RESTARANT,BAR OR HOTEL.....11 SKILLED TRADES.....12 OTHER.....13
	01											
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IDENTIFICATION CODE	1 Napenda kukuuliza maswali kuhusu kazi uliyofanya kama mwaajiriwa katika kipindi cha siku saba zilizopita (kuanzia...) ulifanya nini katika kazi hii? Inahusika na aina gani ya mradi, kiwanda au blashara?	2 Ulifanya kazi hii kwa masaa mangapi kwa siku katika kipindi cha siku saba zilizopita (kuanzia...)?	3 Masaa yote haya (CITE TOTAL FROM Q. 2) kwa kawaida ndiyo unayotumia katika kufanya kazi hii kwa wiki?	4 Kwa nini haukufanya kazi kwa masaa ya kawaida kwa siku saba zilizopita?	5 Kwa kawaida ni masaa mangapi unafanya kazi hii kwa wiki?	6 Umefanya kazi hii kwa muda wa wiki ngapi katika kipindi cha miezi 12 iliyopita (kuanzia...)?	7 Umekuwa ukifanya kazi hii kwa miaka mingapi? IF LESS THAN ONE YEAR GET MONTHS.	8 Nani ulimfanyia kazi katika kipindi cha siku saba zilizopita? Hiyo ni kwamba ulifanya...							
	FARMING.....1 FISHING.....2 TRADER/MERCHANT/SALES.....3 TRANSPORT.....4 CONSTRUCTION.....5 EDUCATION PROFESSIONAL/ADMIN.....6 HEALTH PROFESSIONAL/ADMIN.....7 OTHER PROFESSIONAL/ADMIN.....8 SECRETARY/CLERICAL.....9 FACTORY WORKER.....10 RESTAURANT BAR OR HOTEL.....11 SKILLED TRADES.....12 OTHER.....13	PROBE FOR ACTUAL HOURS EVERY DAY. INCLUDE OVERTIME. DO NOT INCLUDE TRAVEL TIME, AUTHORIZED ABSENCES, PAID SICK LEAVE OR PAID HOLIDAYS.		OWN ILLNESS.....1 ILLNESS OF FAMILY MEMBER.....2 OVERTIME DUE TO ILLNESS OF OTHER EMPLOYEE.....3 OTHER OVERTIME.....4 PUBLIC OR RELIGIOUS HOLIDAY..5 VACATION.....6 FUNERAL/MOURNING PERIOD.....7 OTHER ABSENCE.....8 (SPECIFY:_____)				Serikali?.....1(>10) Shirika la Umma?.....2(>10) Mwaajiri binafsi?.....3 Shirika?.....4 Shirika la dini?.....5 Chama kinachotawala?.....6(>10) Kazi nyingine (eleza)?...7							
DESCRIPTION	CODE	MON.	TUE.	WED.	THU.	FRI.	SAT.	SUN.	TOTAL	YES.....1 (> 6) NO.....2	HOURS	WEEKS	YEARS	MONTHS	
01															
02															
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SECTION 7. ACTIVITIES AND NON-LABOR INCOME PART B. EMPLOYMENT DURING THE PAST 7 DAYS (CONT.)

IDENTIFICATION CODE	9 Kwa jumla ni watu wangapi wanaofanya kazi mahali hapa?	10 Je, ajira yako ni ya muda, ama ni ya kudumu?	11 Unastahili kupata likizo ya ugonjwa ya kulipiwa katika kazi hii?	12 Je? katika kipindi cha siku saba zilizopita, mtasala wā aya alikupa siku za kupunzika kwa ajili ya kuugua?	13 Ulichukua msaia mangapi ya kupunzika kwa ajili ya kuugua katika kipindi cha siku saba zilizopita?	14 Mwajiri wako ana kituo cha aya kwa ajili ya wafanyakazi wake?	15 Mwajiri wako anawalipa wafanyakazi wake gharama za matibabu?	16 Analipa gharama zote za matibabu au baadhi tu?	17 Unastahili kulipa malipo kidogo kuliko wagonjwa wengine katika vituo fulani yya aya kwa ajili ya kazi yako?	18 INTERVIEWER: LOOK AT THE ANSWER TO QUESTIONS 14, 15, AND 17. IS THERE AT LEAST ONE ANSWER THAT IS "YES"?	19 Katika kaya hii kuna wanakaya wanaolipiwa gharama za matibabu na mwajiri wako?	20 Ni kina nani katika kaya hii huliipiwa gharama za matibabu na mwajiri wako? YES.....1 NO.....2		
	NO. OF PEOPLE	TEMPORARY.1 PERMANENT.2	YES..1 NO...2 (► 14)	YES..1 NO...2 (► 14)	HOURS	YES....1 NO.....2	YES...1 NO....2 (► 17)	ALL.....1 SOME.....2	YES.....1 NO.....2 DON'T KNOW...3	YES....1 NO.....2 (► 21)	YES....1 NO.....2 (► 21)	A. Mwenzi wako?	B. Watoto wako?	C. Wengine katika familia?
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IDENTIFICATION CODE	21 Unapokea mshahara kwa hii kazi?	22 Mshahara wako ni kiasi gani na unalipwa mara ngapi?	23 Kodi imeshatolewa kwenye mshahara huu?	24 Umeshahawi kulipwa au utalipwa marupurupu yeyote katika kazi yako?	25 Haya marupurupu ni kiwango gani?	26 Ulipata malipo kwa ajili ya kazi kwa muda wa ziada?	27 Umelipwa kiasi gani kwa ajili ya kazi kwa muda wa ziada kwa kazi hii?	28 Umepokea au utapokea malipo kwa hii kazi kwa njia ya chakula, mazao, au wanyama?	29 Vitu hivyo vina thamani gani kwenye soko na unavipata mara ngapi?	30 Umepewa au utapewa nyumba bure au ruzuku kwa ajili ya nyumba kutokana na kazi yako?	31 Ungelipa kiasi gani kwa ajili ya kodi ya nyumba kama hakungekuwa na nyongeza yeyote?	32 Umeshapokea au utapokea malipo ya aina nyingine yeyote zaidi ya fedha kutokana na kazi hii?	33 Malipo haya ya aina nyingine yana thamani gani?	34 Utapata malipo ya uzeeni kwa hii kazi?
	YES...1 NO...2 (> 24)	UNIT OF TIME DAY...3 WEEK...4 MONTH...5 YEAR...6 AMOUNT TIME UNIT	YES...1 NO...2	YES...1 NO...2 (> 26)	UNIT OF TIME DAY...3 WEEK...4 MONTH...5 YEAR...6 AMOUNT TIME UNIT	YES...1 NO...2 (> 28)	UNIT OF TIME DAY...3 WEEK...4 MONTH...5 YEAR...6 AMOUNT TIME UNIT	YES...1 NO...2 (> 30)	UNIT OF TIME DAY...3 WEEK...4 MONTH...5 YEAR...6 AMOUNT TIME UNIT	YES...1 NO...2 (> 32)	UNIT OF TIME DAY...3 WEEK...4 MONTH...5 YEAR...6 AMOUNT TIME UNIT	YES...1 NO...2 (> 34)	UNIT OF TIME DAY...3 WEEK...4 MONTH...5 YEAR...6 AMOUNT TIME UNIT	YES...1 NO...2
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