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**NATIONAL STATISTICAL OFFICE
ZOMBA**

**CONFIDENTIAL
NATIONAL CENSUS OF AGRICULTURE AND LIVESTOCK**

Module 1: Composition and characteristics of the household

Important information for the interviewer:

Create a reference number by combining the cluster, household, module and questionnaire number. Write this number NOW on the top of all pages.

CLUSTER	HOUSEHOLD	MODULE NUMBER	QUESTIONNAIRE NUMBER	REFERENCE NUMBER
<input type="text"/>	<input type="text"/>	<input type="text" value="1"/>	<input type="text"/>	<input type="text" value="1"/>

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A. Interview Information

A1. Interviewer's number/ name

A2. Head of household

A3. District code/name

A4. TA /STA/ Area

<input type="text"/>	<input type="text"/>
<input type="text"/>	
<input type="text"/>	<input type="text"/>
<input type="text"/>	

A5. Date

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

A6. Respondent

Member number
<input type="text"/>

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DEMOGRAPHIC CHARACTERISTICS

Member line number	01	02	03	04	05	06	07	08	09	10
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(If this is the second or third Module 1 questionnaire for this household, the household member numbers are from 11 to 20 or from 21 to 30)

MAKE A COMPLETE LIST OF NAMES OF ALL PERSONS WHO NORMALLY LIVE AND EAT TOGETHER IN THIS HOUSEHOLD. STARTING WITH THE HEAD OF THE HOUSEHOLD. IF MORE THAN TEN MEMBERS, USE A NEW QUESTIONNAIRE

Head										
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C1 What is [NAME]'s relationship to the head of the household?

	1	2	3	4	5	6	7	8	9	10
Head	<input type="checkbox"/>									
Spouse	<input type="checkbox"/>									
Son/Daughter	<input type="checkbox"/>									
Grandchild	<input type="checkbox"/>									
+ Brother/Sister	<input type="checkbox"/>									
Parent	<input type="checkbox"/>									
Other relative	<input type="checkbox"/>									
Not related	<input type="checkbox"/>									

C2 Is [NAME] male or female?

Male	1	2	3	4	5	6	7	8	9	10
Female	<input type="checkbox"/>									

C3 Was [NAME] born in this village?

Yes	1	2	3	4	5	6	7	8	9	10
No	<input type="checkbox"/>									

C4 How old was name [NAME] at his/her last birthday?

Completed years										
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LIST OF PARCELS OF LAND OWNED OR OPERATED BY HOUSEHOLD MEMBERS

Include all lands owned or operated by household members whether cultivated (gardens) or not.

Serial number of the parcel of land

1	2	3	4	5	6	7	8	9	10
---	---	---	---	---	---	---	---	---	----

[Start with the dwelling unit parcel]

C5 Who operates this land?

[Member number from the hh list]

--	--	--	--	--	--	--	--	--	--

[Operator is one that makes decisions on the parcel]

C6 How was this parcel of land obtained?

From village headman	1	<input type="checkbox"/>									
Inherited/kept when wife/ husband passed away	2	<input type="checkbox"/>									
Inherited from mothers side	3	<input type="checkbox"/>									
Inherited from fathers side	4	<input type="checkbox"/>									
Borrowed from parents	5	<input type="checkbox"/>									
Bought	6	<input type="checkbox"/>									
Rented	7	<input type="checkbox"/>									
Borrowed	8	<input type="checkbox"/>									
Government	9	<input type="checkbox"/>									
Other	10	<input type="checkbox"/>									

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C7 Who is the owner of this parcel of land?

Operator	1	<input type="checkbox"/>								
Other household member	2	<input type="checkbox"/>								
Parents	3	<input type="checkbox"/>								
Other relative	4	<input type="checkbox"/>								
Landlord	5	<input type="checkbox"/>								
Institution	6	<input type="checkbox"/>								
Estate	7	<input type="checkbox"/>								
Other	8	<input type="checkbox"/>								

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C8 Is the parcel of land customary, leasehold, freehold or public?

Customary	1	<input type="checkbox"/>									
Leasehold	2	<input type="checkbox"/>									
Freehold	3	<input type="checkbox"/>									
Public	4	<input type="checkbox"/>									

C9 Where is this parcel of land located?

Within the village	1	<input type="checkbox"/>								
Outside village, but same TA	2	<input type="checkbox"/>								
Outside TA, but same district	3	<input type="checkbox"/>								
Different district	4	<input type="checkbox"/>								

C10 Did you receive a voucher/ coupon for subsidized fertilizer/seed during this cropping season (2006/2007)?

	Yes	1	<input type="checkbox"/>	+
C14←	No	2	<input type="checkbox"/>	

C11 How did you use the voucher?

		<u>Fertilizer</u>		<u>Seed</u>	
		Yes	No	Yes	No
C14←	Bought	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C14←	Gave it to friends/relatives	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C14←	Did not use the voucher	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Sold the voucher	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**C12 IF sold SEED voucher:
For how much did you sell it?**

Amount in Kwacha

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**C13 IF sold FERTILIZER voucher:
For how much did you sell it?**

Amount in Kwacha

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C14 Did you receive any credit for agricultural activities during this agricultural season (2006/2007)?

Yes 1

C17 ← No 2

C15 What was the amount?

Amount in Kwacha

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C16 From which organisations did you get the credit (multiple response)?

- Government 1
- ADMARC 1
- Malawi Rural Finance 1
- Mardef 1
- Another parastatal organisation 1
- Bank 1
- Moneylender 1
- A non-governmental organisation 1
- Other sources 1

C17 Did your household buy/ obtain any inorganic fertilizer since the last harvest (and is to be used this season)?

Yes 1

C20 ← No 2

C18 What is the total quantity of inorganic fertilizer that was bought/ obtained by the household since the last harvest (and is to be used this season)?

Quantity (kg)

C19 What is the total cost of inorganic fertilizer that was bought/ obtained by the household since the last harvest (and is to be used this season)?

Total cost (MK)

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C20 Did your household buy/ obtain any organic fertilizer since the last harvest (and is to be used this season)?

C22 ← Yes 1 +
 No 2

C21 What is the total cost of organic fertilizer that was bought/ obtained by the household since the last harvest (and is to be used this season)?

Total cost (MK)

C22 Did your household buy/ obtain any of the following inputs since the last harvest and is to be used this season?

C23 What was the total costs for your household to buy/ obtain this input since the last harvest (for use this season)?

C24 From where did your household buy/ obtain most of this input since the last harvest (for use this season)?

	Yes-1	Total cost in Kwacha	Source (code)
Insecticides	<input type="checkbox"/>	<table border="1" style="width: 150px; height: 20px;"></table>	<table border="1" style="width: 80px; height: 20px;"></table>
Fungicides	<input type="checkbox"/>	<table border="1" style="width: 150px; height: 20px;"></table>	<table border="1" style="width: 80px; height: 20px;"></table>
Herbicides	<input type="checkbox"/>	<table border="1" style="width: 150px; height: 20px;"></table>	<table border="1" style="width: 80px; height: 20px;"></table>
Fumigants	<input type="checkbox"/>	<table border="1" style="width: 150px; height: 20px;"></table>	<table border="1" style="width: 80px; height: 20px;"></table>
None	<input type="checkbox"/>	<table border="1" style="width: 150px; height: 20px;"></table>	<table border="1" style="width: 80px; height: 20px;"></table>
Other	<input type="checkbox"/>	<table border="1" style="width: 150px; height: 20px;"></table>	<table border="1" style="width: 80px; height: 20px;"></table>

Code list for input sources: 01= Government 02=Agora 03=Farmers world 04=Admarc
 05=Transglobe 06= Local market/stores 07=Vendors 08= Kulima gold,
 09=Relative, friend, neighbour, 10 = SFFRFM, 11 = Other

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C25 Did your household buy seeds since the last harvest?

C29 ← Yes 1
 No 2

C26 What was the total quantity your household bought of each type of seed since the last harvest?

C27 What was the total costs paid by your household for each type of seed since the last harvest?

C28 From where did your household buy most of this seed?

Type of seed	Yes-1	Quantity (kg)	Total cost (Kwacha)	Source (code list)
Maize_local	<input type="checkbox"/>			
Maize_composite	<input type="checkbox"/>			
Maize_hybrid	<input type="checkbox"/>			
Maize_Hybrid_recycled	<input type="checkbox"/>			
Tobacco_NDDF	<input type="checkbox"/>			
Tobacco_flue cured	<input type="checkbox"/>			
Tobacco_SDDF	<input type="checkbox"/>			
Tobacco_Oriental	<input type="checkbox"/>			
Tobacco_Burley	<input type="checkbox"/>			
Tobacco_Other	<input type="checkbox"/>			
Rice_local	<input type="checkbox"/>			
Rice_faya	<input type="checkbox"/>			
Rice_pussa	<input type="checkbox"/>			
Rice_TCG10	<input type="checkbox"/>			
Rice_IET4094(senga)	<input type="checkbox"/>			
Rice_kilombero	<input type="checkbox"/>			

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C25 – C28 cont.

Type of seed	Yes-1	Quantity (kg)	Total cost (Kwacha)	Source (code list)
Rice_ITA	<input type="checkbox"/>			
Rice_Mtupatupa	<input type="checkbox"/>			
Rice_Other	<input type="checkbox"/>			
Groundnuts_Chalimbana	<input type="checkbox"/>			
Groundnuts_CG7	<input type="checkbox"/>			
Groundnuts_Manipinta	<input type="checkbox"/>			
Groundnuts_Mawanga	<input type="checkbox"/>			
Groundnuts_Other	<input type="checkbox"/>			
Cotton	<input type="checkbox"/>			
Paprika	<input type="checkbox"/>			
Soya beans	<input type="checkbox"/>			
Tea	<input type="checkbox"/>			
Coffee	<input type="checkbox"/>			
Macadamia	<input type="checkbox"/>			
Cassava	<input type="checkbox"/>			
Sugar cane	<input type="checkbox"/>			
Sorghum	<input type="checkbox"/>			
Ordinary beans	<input type="checkbox"/>			
Peas	<input type="checkbox"/>			
Grams	<input type="checkbox"/>			

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Code list for input sources: 01= Government, 02=Agora, 03=Farmers world, 04=Admarc, 05=Transglobe 06= Local market/stores 07=Vendors 08= Kulima gold, 09= SFFRFM, 10= Other

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MACHINERY AND EQUIPMENT

Record each type of equipment, building and structure as stated by the holder/manager.

- C29 Does your household or any of the household members own or have at your disposition any of the following items, in working condition?**
- C30 How many items of this type does your household or any of the household members own or have at your disposition in working condition?**
- C31 What is the type of ownership for the best item of this type?**

	Yes	No	Number	Type of ownership (code list)
Hoes	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>
Slashers	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>
Axes	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>
Sprayers	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>
Tractors	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>
Generator	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>
Cultivator	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>
Grain Mill	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>
Panga knives	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>
Watering can	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>
Ploughs	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>
Ridgers	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>
Oxcarts	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>
Treadle pump	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>
Motorised pump	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>
Sickle	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>

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Type of ownership: 1= Solely owned, 2= Shared, 3= Rented, 4= Other.

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C32 Did your household buy any of the following items since the last harvest (2005/2006)?

C33 Where did your household buy this item (give an answer for the last item, if buying more than one)?

C34 How many items of this type did your household buy since the last harvest (2005/2006)?

C35 What was the total cost of buying this type of equipment since the last harvest (2005/2006)?

	Yes	No	Sources (code)	Number	Total cost (Kwacha)
Hoes	<input type="checkbox"/>	<input type="checkbox"/>			
Slashers	<input type="checkbox"/>	<input type="checkbox"/>			
Axes	<input type="checkbox"/>	<input type="checkbox"/>			
Sprayers	<input type="checkbox"/>	<input type="checkbox"/>			
Tractors	<input type="checkbox"/>	<input type="checkbox"/>			
Generator	<input type="checkbox"/>	<input type="checkbox"/>			
Cultivator	<input type="checkbox"/>	<input type="checkbox"/>			
Grain Mill	<input type="checkbox"/>	<input type="checkbox"/>			
Panga knives	<input type="checkbox"/>	<input type="checkbox"/>			
Watering can	<input type="checkbox"/>	<input type="checkbox"/>			
Ploughs	<input type="checkbox"/>	<input type="checkbox"/>			
Ridgers	<input type="checkbox"/>	<input type="checkbox"/>			
Oxcarts	<input type="checkbox"/>	<input type="checkbox"/>			
Treadle pump	<input type="checkbox"/>	<input type="checkbox"/>			
Motorised pump	<input type="checkbox"/>	<input type="checkbox"/>			
Sickle	<input type="checkbox"/>	<input type="checkbox"/>			
Other	<input type="checkbox"/>	<input type="checkbox"/>			

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C36 Does your household have any of the following structures?

C37 How many does your household have of each of these structures?

	Yes	No	Number
Chicken house	<input type="checkbox"/>	<input type="checkbox"/>	
Livestock kraal	<input type="checkbox"/>	<input type="checkbox"/>	
Poultry kraal	<input type="checkbox"/>	<input type="checkbox"/>	
Attic	<input type="checkbox"/>	<input type="checkbox"/>	
Drying area	<input type="checkbox"/>	<input type="checkbox"/>	
Storage house	<input type="checkbox"/>	<input type="checkbox"/>	
Water pump	<input type="checkbox"/>	<input type="checkbox"/>	
Granary	<input type="checkbox"/>	<input type="checkbox"/>	
Barn	<input type="checkbox"/>	<input type="checkbox"/>	
Pig sty	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	

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LAND TENURE

C38 How has the total area of your parcels changed compared to 10 years ago?

- C40 ← Increased 1
- C41 ← Decreased 2
- C41 ← Remained the same 3

C39 Why has the total area of your parcels increased? [Multiple response]

- C41 ← Inherited 1
- C41 ← Allocation from lineage 1
- C41 ← Allocation by Village head 1
- C41 ← Bought more land 1
- C41 ← Rented more land 1
- C41 ← Gift from relatives 1
- C41 ← Other 1

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C40 Why has the total area of your parcels decreased? [Multiple response]

- Transferred to heirs 1
- Sold 1
- Stopped renting 1
- Encroachment 1
- Gift to relatives 1
- Taken away [exploited] 1
- Taken away [Govt] 1
- Washed away by flood 1
- Other 1

C41 Do you fear that your own land will be encroached upon? [that is for land owned]

- Yes 1
- No 2

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C42 Do you fear that your own land will be taken away from you? [when spouse pass away etc, refer to manual for examples]

- Yes 1
- No 2

C43 Has your household rented out one or more parcel of land this agricultural season?

- Yes 1
- C48 ← No 2

C44 How many acres of land has your household rented out this agricultural season?

Total Area [acres]

C45 How much did your household received in total for renting out these acres of land this agricultural season?

Total Price [MK]

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C46 To whom have you rented out this land [MULTIPLE RESPONSE]

- Relative 1
- Non relative in the village 1
- Non relative outside village 1
- Other 1

C47 What was the main reason for renting out the land?

- Went away from village 1
- Married away 2
- Have enough land 3
- Needed Money 4
- Was sick 5
- Looking after sick 6
- Not enough labour 7
- Other 8

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C48 Has your household sold any parcel of land in the past 10 years?

- C52 ← Yes 1
- No 2

**C49 Now I would like to have some information of the last parcel the household sold:
How many acres was this parcel?**

Area of last parcel sold [acres]

C50 To whom did your household sell this parcel of land? (the last parcel being sold)

- Relative 1
- Non relative in the village 2
- Non relative outside village 3
- Other 4

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C51 Why did you sell this parcel of land? (the last parcel being sold)

[MULTIPLE RESPONSE]

- Went away from village 1
- Married 1
- Had more land than needed 1
- Needed Money 1
- Was sick 1
- Looking after sick 1
- Not enough labour 1
- Other 1

C52 Has your household had any dispute with anyone over land in the past 10 years?

- C55 ← Yes 1
- No 2

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C53 With whom was the dispute? [MULTIPLE RESPONSE]

- Relative from husband side 1
- Relative from wife side 1
- Other relative 1
- Non Relative 1
- Village headman 1
- Politicians 1
- Other 1

C54 Who resolved the dispute

- Was not resolved 1
- Ourselves 2
- Elders [Husband side] 3
- Elders [wife side] 4
- Traditional leaders 5
- District commissioner 6
- Party officials 7
- Courts 8
- Other 9

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C55 If you had a dispute over your land at this time, where would you go to seek help first?

- Elders [Husband side] 1
- Elders [wife side] 2
- Traditional leaders 3
- District commissioner 4
- Party officials 5
- Courts 6
- Ward councillors 7
- Other 8

C56 Does any of your household members collect things such as *Branches of wild trees, Hunt game, Medicinal herbs/roots, Honey, Mushrooms, Caterpillars, birds, Mice, or Fruit and berries*

Yes 1

C65 ←

No 2

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C57 Where do you collect branches of wild trees? [MULTIPLE RESPONSE]

C58 Where do you hunting game? [MULTIPLE RESPONSE]

C59 Where do you collect medicinal herbs/roots? [MULTIPLE RESPONSE]

C60 Where do you collect honey? [MULTIPLE RESPONSE]

C61 Where do you collect mushrooms? [MULTIPLE RESPONSE]

C62 Where do you collect caterpillars? [MULTIPLE RESPONSE]

C63 Where do you catch birds? [MULTIPLE RESPONSE]

C64 Where do you collect mice? [MULTIPLE RESPONSE]

C65 Where do you collect fruit and berries? [MULTIPLE RESPONSE]

	Own HH land	From village land	From other village land	Estate lands	Other
Branches of wild trees	<input type="checkbox"/>				
Hunting game	<input type="checkbox"/>				
Medicinal herbs/roots	<input type="checkbox"/>				
Honey	<input type="checkbox"/>				
Mushrooms	<input type="checkbox"/>				
Caterpillars/insects	<input type="checkbox"/>				
Birds	<input type="checkbox"/>				
Mice	<input type="checkbox"/>				
Fruit and berries	<input type="checkbox"/>				

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FOOD SECURITY

C66-1 Did your household grow any staple food crops last agriculture season (2005/2006)?

End ← Yes 1
 No 2

C66-2 Do you still have staple food left from your 2005/2006 harvest?

C 68 ← Yes 1
 No 2

C67 In which month will your staple food (2005/2006) run

C69 ←

Month	Year

C68 In which month did your staple food (2005/2006) run

Month	Year

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C69 During the last 7 days how many main meals did the household take per day?

One meal 1
 Two meals 2
 Three meals or more 3

C70 What staple food did your household mainly eat in these meals?

	Code	First meal	Second meal	Third meal
Nsima from Maize	01	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nsima from other cereals	02	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nsima from Cassava	03	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nsima from Sorghum	04	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nsima from Millet	05	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nsima from Rice	06	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plantains	07	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Raw Cassava	08	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sweet potato	09	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Irish potato	10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Raw maize cobs	11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bread	12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rice	13	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	14	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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C71 During the past 7 days, how often did your household eat the following food items?

	Almost daily (more than 3 times)	Two or three times	Once	Never
Nuts and seeds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vegetables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fruits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Milk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chicken	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Meat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eggs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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C72 In the past days what were the main sources of food for the household?

[MULTIPLE RESPONSE]

Own produce	1	<input type="checkbox"/>
Purchase from market	1	<input type="checkbox"/>
Casual labour paid in food	1	<input type="checkbox"/>
Wild food	1	<input type="checkbox"/>
Gift	1	<input type="checkbox"/>
Food for work	1	<input type="checkbox"/>
Free food	1	<input type="checkbox"/>
Winter/irrigated own food	1	<input type="checkbox"/>
Other	1	<input type="checkbox"/>

C73 During the past 7 days, what income sources did the household use to provide for the food consumed?

Sale of own maize	1	<input type="checkbox"/>
Sale of own other food crops	1	<input type="checkbox"/>
Sale of own cash crops	1	<input type="checkbox"/>
Sale of own livestock	1	<input type="checkbox"/>
Sale of own fish	1	<input type="checkbox"/>
Sale of own milk	1	<input type="checkbox"/>
Sale of firewood	1	<input type="checkbox"/>
Ganyu	1	<input type="checkbox"/>
Income from business work	1	<input type="checkbox"/>
Income from paid job	1	<input type="checkbox"/>
Remittances	1	<input type="checkbox"/>
Barter of household assets	1	<input type="checkbox"/>
Barter of livestock	1	<input type="checkbox"/>
Loans	1	<input type="checkbox"/>
Other	1	<input type="checkbox"/>

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C74 During the past 7 days did it happen that your family could not afford to eat what you normally eat (main meals)?

Yes 1

C79 ← No 2

C75 How often did it happen?

+	Almost daily (more than 3 times)	Two or three times	Once
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C76 How did your household cope? [MULTIPLE RESPONSE]

Ate less of staple food	1	<input type="checkbox"/>
Shifted to cheaper food	1	<input type="checkbox"/>
Combined cheaper food /wild food	1	<input type="checkbox"/>
Shifted to wild food	1	<input type="checkbox"/>
Food for work	1	<input type="checkbox"/>
Hand outs from Govt/NGO	1	<input type="checkbox"/>
Hand outs from Religious organisations	1	<input type="checkbox"/>
Cash for work	1	<input type="checkbox"/>
Other	1	<input type="checkbox"/>

C77 During the past 7 days did any members of the household fail to eat a main meal?

Yes 1

C79 ← No 2

C78 Which members of the household failed to eat a main meal? [MULTIPLE RESPONSE]

Children < 12 yrs	1	<input type="checkbox"/>
Adult Males	1	<input type="checkbox"/>
Adult Females	1	<input type="checkbox"/>
All members	1	<input type="checkbox"/>

+

+

. Interview Completion Information

+

+

C79. Result

- Completed with selected household 1
- Incomplete 2
- Refusal 3 +
- Not found 4
- Too ill 5

C80 Comments?

- Yes 1
- No 2

Comments

+

+