



AUTHORIZED FOR PUBLIC DISCLOSURE

Malawi Government
National Statistical Office

Questionnaire
Number

FIFTH INTEGRATED HOUSEHOLD SURVEY 2019/2020 AND THE INTEGRATED HOUSEHOLD PANEL SURVEY 2019

THIS SURVEY IS BEING CONDUCTED BY THE NATIONAL STATISTICAL OFFICE UNDER THE AUTHORITY OF THE 2013 STATISTICS ACT.

THIS INFORMATION IS STRICTLY CONFIDENTIAL AND IS TO BE USED FOR STATISTICAL PURPOSES ONLY.

HOUSEHOLD QUESTIONNAIRE

MODULE A-1: HOUSEHOLD IDENTIFICATION

WRITE CODES FOR TA, STA, OR TOWN; EA; AND HH ID. WRITE NAME OF DISTRICT; TA; VILLAGE; AND HOUSEHOLD HEAD.

A01. DISTRICT:	CODE	NAME	
	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
A02. TA, STA, or TOWN:	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
A03. ENUMERATION AREA:	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
A04. PLACE / VILLAGE NAME:		
A05. PANEL OR CROSS-SECTIONAL:	CROSS-SECTION.....1 PANEL A2>>A09 PANEL B3>>A09	<input style="width: 20px; height: 20px;" type="text"/>
A06. HOUSEHOLD ID (FROM LIST):	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
A07. NAME OF HOUSEHOLD HEAD:		
A08. DWELLING STRUCTURE NO. (FROM LIST):	CODE	(THEN>>A15)	
	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>		
A09. IHPS Y3-HHID FROM TRACKING FORM:	<input style="width: 20px; height: 20px;" type="text"/>	-	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
A10. NAME OF HOUSEHOLD HEAD FROM IHPS:		
A11. LOCATION OF HOUSEHOLD:	SAME DWELLING UNIT.....1 ▶ A13 DIFFERENT DWELLING UNIT WITHIN SAME VILLAGE/URBAN LOCATION.....2 DIFFERENT VILLAGE/URBAN LOCATION, WITHIN SAME DISTRICT.....3		<input style="width: 20px; height: 20px;" type="text"/>
A12. IHPS 2016 ROSTER ID & NAME OF TRACKING TARGET:	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
A13. CURRENT NAME OF HOUSEHOLD HEAD:		
A14. LOWEST IHPS 2016 ROSTER ID NUMBER FROM SECTION B, QUESTION 06_1:	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>		REFER TO COMPLETED T0 AND CONFIRM IN MODULE B HOUSEHOLD ROSTER

VISIT 1

A15. DESCRIPTION OF LOCATION OF HOUSEHOLD:

.....

A16. WHAT ARE THE GPS COORDINATES OF THE DWELLING?

LATITUDE (S)									
LONGITUDE (E)									

A17. WEATHER CONDITION AT MEASUREMENT:

- | | |
|------------------------------------|--|
| Clear/ Sunny.....1 | Mostly Cloudy / Considerable Cloudiness..4 |
| Mostly Clear / Mostly Sunny.....2 | Completely Cloudy5 |
| Partly Cloudy / Partly Sunny.....3 | Rainy.....6 |

A18. PHONE NUMBER FOR HOUSEHOLD HEAD:

A. NAME: _____ B. PHONE: _____

VISIT 2 (ONLY APPLICABLE FOR PANEL HOUSEHOLDS)

A31. IS THIS HOUSEHOLD IN THE SAME DWELLING AS IN VISIT 1? YES...1 ► A33
 NO2

A32. DESCRIPTION OF NEW LOCATION OF HOUSEHOLD:

.....

A33. WHAT ARE THE GPS COORDINATES OF THE DWELLING? (RETAKE - DO NOT COPY)

LATITUDE (S)									
LONGITUDE (E)									

A34. WEATHER CONDITION AT MEASUREMENT:

- | | |
|------------------------------------|--|
| Clear/ Sunny.....1 | Mostly Cloudy / Considerable Cloudiness..4 |
| Mostly Clear / Mostly Sunny.....2 | Completely Cloudy5 |
| Partly Cloudy / Partly Sunny.....3 | Rainy.....6 |

A35. PHONE NUMBER FOR HOUSEHOLD HEAD: (RETAKE - DO NOT COPY)

A. NAME: _____ B. PHONE: _____

A19. CONTACT INFORMATION - REFERENCE PERSON 1:

A. NAME: _____
 B. RELATIONSHIP TO HEAD: _____
 C. PHONE: _____
 D. DISTRICT: _____
 E. TA, STA, or TOWN: _____
 F. PLACE / VILLAGE: _____

A20. CONTACT INFORMATION - REFERENCE PERSON 2:

A. NAME: _____
 B. RELATIONSHIP TO HEAD: _____
 C. PHONE: _____
 D. DISTRICT: _____
 E. TA, STA, or TOWN: _____
 F. PLACE / VILLAGE: _____

A21. CONTACT INFORMATION - REFERENCE PERSON 3:

A. NAME: _____
 B. RELATIONSHIP TO HEAD: _____
 C. PHONE: _____
 D. DISTRICT: _____
 E. TA, STA, or TOWN: _____
 F. PLACE / VILLAGE: _____

MODULE A-2: SURVEY STAFF DETAILS

VISIT 1

A22. ENUMERATOR CODE:

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A23. ENUMERATOR NAME:

	DATE	START	END	MODULES
A24. Attempt 1				
Attempt 2				
Attempt 3				

HH MM HH MM

ENUMERATOR>> NEXT PAGE

A25. SUPERVISOR CODE:

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A26. SUPERVISOR NAME:

A27. DATE OF INSPECTION:

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DD MM YYYY

VISIT 2 (ONLY APPLICABLE FOR PANEL HOUSEHOLDS)

A36. ENUMERATOR CODE:

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A37. ENUMERATOR NAME:

	DATE	START	END	MODULES
A38. Attempt 1				
Attempt 2				
Attempt 3				

HH MM HH MM

ENUMERATOR>> NEXT PAGE

A39. SUPERVISOR CODE:

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A40. SUPERVISOR NAME:

A41. DATE OF INSPECTION:

--	--	--	--

DD MM YYYY

RECORD GENERAL NOTES ABOUT THE INTERVIEW AND ANY SPECIAL INFORMATION THAT WILL BE HELPFUL FOR SUPERVISORS AND DATA ANALYSIS.	RECORD GENERAL NOTES ABOUT THE INTERVIEW AND ANY SPECIAL INFORMATION THAT WILL BE HELPFUL FOR SUPERVISORS AND DATA ANALYSIS.
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PLEASE MARK AN 'X' IN BOX IF HOUSEHOLD REFUSAL. PROVIDE DETAILS. <div style="float: right; border: 1px solid black; width: 30px; height: 30px; margin-top: 10px;"></div>	PLEASE MARK AN 'X' IN BOX IF HOUSEHOLD REFUSAL. PROVIDE DETAILS. <div style="float: right; border: 1px solid black; width: 30px; height: 30px; margin-top: 10px;"></div>
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INTRODUCTION TO THE HOUSEHOLD TO BE INTERVIEWED

CONVEY THE FOLLOWING INFORMATION TO THE RESPONDENT:

Every few years the National Statistical Office in Zomba selects at random several hundred households in each district of the country to ask them questions about how they are living. It is within the legal mandate of the NSO to collect this information and the responses which are provided by the households to these questions are intended to help the government of Malawi do a better job in meeting the needs of all Malawians.

CROSS-SECTION:

Your household was selected as one of those to which the IHS questions will be asked this time. You were not selected for any specific reason. Simply your name was on a list of all of the households in this area, and your name was chosen randomly.

ALL PANEL:

You were one of the households interviewed as part of the Third Integrated Household Survey (IHS3) in 2009/2010 administered by the National Statistical Office in Zomba and selected for a follow-up interview in 2013 and again in 2016 as part of the Integrated Household Panel Survey (IHPS). The three surveys asked questions about how you were living and the responses provided were intended to help the government of Malawi do a better job in meeting the needs of all Malawians.

IHPS HOUSEHOLDS:

Now in 2019, we are returning to see how things are progressing in terms of living standards.

SPLIT-OFF HOUSEHOLDS:

At the time of IHPS 2016, one of your household members was living in a selected household, and we would like to see how things are progressing and how they, and the rest of their new household, are living now.

ALL:

I would like to ask the questions in this form to you as head of household or spouse of the head. I will also need to ask questions to other members of your household, as well as weigh and measure the height of any children under age 5 years who live in your household. These questions will take several hours to complete. All of your answers will be held in confidence. The answers which you and the members of your household might give me will only be used by the NSO or under its supervision.

Before I start, do you have any questions or is there anything which I have said on which you would like any further clarification? May I proceed with interviewing you and members of your household?

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MODULE B: HOUSEHOLD ROSTER (CONTINUED)

B01	B22 ASK OF ONLY HH HEAD: What is the main language you speak at home? CHEWA . . 1 NYANJA . 2 YAO . . . 3 TUMBUKA . 4 LOMWE . . 5 NKHONDE . 6 NGONI . . 7 SENA . . . 8 NYAKYUSA 9 TONGA . 10 LAMEYA . 11 SENA . . . 12 SUKWA/NDALI 13 ENGLISH . 14 OTHER . . 15	B22_4 ENUMERATOR: IS THIS PERSON [NAME] AGED 12 YEARS OR OLDER? YES . . 1 NO . . . 2 >> NEXT ROW	B23 What religion, if any, does [NAME] practice? NONE 1 TRADITIONAL . . 2 CHRISTIANITY . . 3 ISLAM 4 OTHER RELIGION (SPECIFY) 5	B24 What is [NAME]'s present marital status? MONOGAMOUS MARRIED OR NON-FORMAL UNION 1 POLYGAMOUS MARRIED OR NON-FORMAL UNION 2 SEPARATED . . . 3 >> NEXT ROW DIVORCED 4 >> NEXT ROW WIDOW OR WIDOWER 5 >> NEXT ROW NEVER MARRIED . . . 6 >> NEXT ROW	B24_1 Under what type of marriage custom (tradition) did [NAME] marry or form a consensual union with his/her spouse? PATRILINEAL . . 1 MATRILINEAL . . 2 OTHER (SPECIFY) 3	B24_2 Upon marriage does [NAME] stay in his or her own village or move to his or her spouse's village? STAY IN OWN VILLAGE AS SPOUSE IS FROM THE SAME VILLAGE 1 STAY IN OWN VILLAGE EVEN IF SPOUSE IS FROM A DIFFERENT VILLAGE . . 2 MOVE TO DIFFERENT VILLAGE 3	B25 Does [NAME]'s spouse live in this household now? YES . . 1 NO . . . 2 >> B27	B26 COPY THE ID CODE OF THE WIFE/ HUSBAND. In what year did [NAME] marry or form a consensual union? IF MORE THAN ONE WIFE, COPY ID CODES OF ALL WIVES RESIDENT IN HOUSEHOLD.						B27 Does [NAME] have a spouse living outside of this household now? YES . . 1 NO . . . 2 >> NEXT ROW	B28 How many spouses does [NAME] have who are residing elsewhere? NUMBER
								SPOUSE #1		SPOUSE #2		SPOUSE #3			
								ID	YEAR	ID	YEAR	ID	YEAR		
1															
2															
3															
4															
5															
6															
7															
8															
9															
10															
11															
12															
13															
14															
15															

ENUMERATOR:
RECORD
PRIMARY
RESPONDENT
ID FOR VISIT 1
MODULE B:

ID

ENUMERATOR:
RECORD VISIT 1
END TIME
FOR MODULE B:

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HOURS MINUTES

MODULE D: HEALTH (CONTINUED)

D01 I D C O D E	D44 IS THIS PERSON, [NAME], A CHILD LESS THAN 5 YEARS OF AGE? YES..1 NO...2>>D47	D45 Where was this child delivered? HOSPITAL/ MATERNITY CLINIC...1 AT HOME...2 OTHER (SPECIFY) .3	D46 Who assisted in delivering this child? DOCTOR/ CLINICAL OFFICER . 1 NURSE/MIDWIFE. . .2 PATIENT ATTENDANT .3 TRADITIONAL BIRTH ATTENDANT4 RELATIVE/FRIEND . .5 NO ONE 6 OTHER (SPECIFY) . . 7	D47 During the past 12 months did you or any other person in the family above 6 years receive any vaccinations to prevent any diseases such as cancer, hepatitis etc? YES..1 NO...2>>>NEXT ROW	D48 How much did you pay for this vaccination? THEN>> NEXT MODULE MK
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

MODULE E: TIME USE & LABOUR (CONTINUED)

E01	E17_3	E17_4	E17_5	E17_6	E17_7
	C O D I E D	What did you mainly do in the last four weeks to find a paid job or start a business? APPLY TO PROSPECTIVE EMPLOYERS FOR A PAID JOB OR INTERNSHIP.....1 PLACE OR ANSWER JOB ADVERTISEMENTS2 POST/UPDATE RESUME ON PROFESSIONAL /SOCIAL NETWORKING SITES3 REGISTER WITH PUBLIC EMPLOYMENT SERVICE.....4 REGISTER WITH A PRIVATE EMPLOYMENT CENTRE/AGENCY5 TAKE PUBLIC SERVICE EXAM OR INTERVIEW.....6 TAKE PRIVATE COMPANY'S EXAM OR INTERVIEW7 SEEK HELP FROM RELATIVES, FRIENDS, OTHERS8 CHECK AT FACTORIES, WORK SITES9 WAIT ON THE STREET TO BE RECRUITED10 SEEK FINANCIAL HELP TO START A BUSINESS11 LOOK FOR LAND, BUILDING, EQUIPMENT, MATERIALS TO START A BUSINESS12 DEVELOPED A BUSINESS PLAN13 APPLY FOR A PERMIT OR LICENSE TO START A BUSINESS14 OTHER (SPECIFY)15	For how long has you been without work and trying to find a job or start a business? >> E17_7 LESS THAN 1 MONTH1 ONE MONTH TO < 3 MONTHS2 THREE MONTHS TO < 6 MONTHS ...3 SIX MONTHS TO < 12 MONTHS ...4 ONE YEAR TO < 2 YEARS5 TWO YEARS OR MORE6	At present does you want to work? YES.1 NO..2 >>E17_10	What is the main reason you did not try to find a paid job or start a business in the last 4 weeks? WAITING FOR RESULTS OF A PREVIOUS SEARCH1 AWAITING RECALL FROM A PREVIOUS JOB2 WAITING FOR THE SEASON TO START3 WAITING TO START NEW JOB OR BUSINESS4 TIRED OF LOOKING FOR JOBS, NO JOBS IN AREA ...5 NO JOBS MATCHING SKILLS, LACKS EXPERIENCE6 CONSIDERED TOO YOUNG/OLD BY EMPLOYERS7 IN STUDIES, TRAINING8 FAMILY / HOUSEHOLD RESPONSIBILITIES9 IN AGRICULTURE / FISHING FOR FAMILY USE10 OWN DISABILITY, INJURY, ILLNESS11 RETIRED, PENSIONER, OTHER SOURCES OF INCOME .12 OTHER (SPECIFY)13
	Activity 1	Activity 2			
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

MODULE E: TIME USE & LABOUR (CONTINUED)

E01 C O D E D I E D	E17_8 Or could you start working within the next 2 weeks?	E17_9 Why are you not available to start working? AWAITING RECALL FROM A PREVIOUS JOB .1 WAITING FOR THE SEASON TO START.....2 IN STUDIES, TRAINING.....3 FAMILY / HOUSEHOLD RESPONSIBILITIES .4 IN FAMILY FARMING/LIVESTOCK FISHING FOR FAMILY USE5 RETIRED, PENSIONER6 OWN DISABILITY, INJURY, ILLNESS7 >>NEXT ROW	E17_10 Which of the following best describes what you are mainly doing at present? PLEASE READ ALL OPTIONS Studying or training1 Engaged in household or family responsibilities2 Family farming, livestock or fishing for family use.....3 Retired or pensioner4 With a long term illness, injury or disability5 Doing volunteering, community or charity work6 Engaged in cultural or leisure activities7 >>NEXT ROW
1	YES.1 >>NEXT ROW NO..2		
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

MODULE E: TIME USE & LABOUR (CONTINUED)

MAIN WAGE JOB OVER THE LAST 12 MONTHS

E01	E18	E19		E20		E21	E21_1
	ENUMERATOR: CHECK QUESTION E06_4. DID THE RESPONDENT REPORT YES TO THIS QUESTION? YES..1 NO..2>>E46	Describe your main wage job over the last 12 months. THE MAIN WAGE JOB IS THE ONE WHERE YOU USUALLY WORK THE HIGHEST NUMBER OF HOURS EVEN IF YOU WERE TEMPORARILY ABSENT LAST WEEK.	(Supervisor to put in occupation code after interview)	(Supervisor to put in industry code after interview)	Describe what kind of trade or business your main wage job over the last 12 months is connected with.	Is your employer for your main wage job over the last 12 months... READ RESPONSES Private Company.....1 Private Individual....2 Federal Government...3 Provincial Government..3 Local Government.....3 State-Owned Enterprise (Parastatal).....4 MASAF/Public Works Program.....5 Church/Religious Organization.....6 Political Party.....7 Other (Specify).....8	Including you, how many persons work at your place of work? 1.....1 2-4 ...2 5-9...3 10-19..4 20-49..5 50+....6
		WRITTEN DESCRIPTION	OCCUP. CODE	WRITTEN DESCRIPTION	IND. CODE		
1							
2							
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4							
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15							

MODULE E: TIME USE & LABOUR (CONTINUED)

LOOKING FOR MORE/DIFFERENT WORK

E01 C O N D I T I O N S	E66 During the last four weeks, did you look for additional paid work? YES..1 NO..2	E67 Would you want to work more hours per week than usually worked, provided the extra hours are paid? YES..1 NO..2 >>E70	E68 Could you start working more hours within the next two weeks? YES..1 NO..2>>E70	E69 How many additional hours per week could you work? NUMBER	E70 Do you want to change his/her current employment situation? YES..1 NO..2 >>NEXT ROW	E71 What is the main reason why you want to change his/her employment situation? PRESENT JOB IS TEMPORARY1 TO HAVE A BETTER PAID JOB2 TO HAVE MORE CLIENTS/BUSINESS ..3 TO WORK MORE HOURS4 TO WORK FEWER HOURS5 TO BETTER MATCH SKILLS6 TO WORK CLOSER TO HOME7 TO IMPROVE OTHER WORKING CONDITIONS8 OTHER (SPECIFY)9
1						
2						
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14						
15						

MODULE F: HOUSING (CONTINUED)

F20 In the event of a black out, what source of energy do you use for ...?		F21 Do you get your electricity via ESCOM?		F22 Following your application to get electricity, how many weeks did you have to wait for your connection to be in working order? IF DID NOT APPLY, RECORD 9999.		F23 Did you have to pay an unofficial fee to get a connection?		F24 In the last 12 months, how frequently did you experience blackouts in your area? READ RESPONSES Never.....1 Rarely.....2 Sometimes.....3 Several times a month.....4		F25 How much did you last pay for electricity? IF NEVER PAYS FOR ELECTRICITY, RECORD 9999 AND >> F26_2		F26 To what length of time does this cost for electricity refer?		F26_1 Would you agree or disagree with the following statement: On the whole ESCOM is responsive to the needs of households like mine?		F26_2 How satisfied are you with ESCOM? (THEN >F31) VERY SATISFIED.....1 SATISFIED.....2 NEITHER SATISFIED NOR DISSATISFIED.....3 DISSATISFIED.....4 VERY DISSATISFIED.....5		F27 Although you do not have electricity in your dwelling, does your village / neighborhood have access to electricity provided by ESCOM?		F28 ENUMERATOR: IS THE DWELLING OWNED BY THE HOUSEHOLD ACCORDING TO F01?	
LIGHTING FIREWOOD.....1 PARAFFIN.....2 CANDLES.....3 OTHER (SPECIFY)....4		COOKING CHARCOAL.....1 FIREWOOD.....2 GAS PARAFFIN.....3 OTHER (SPECIFY)....5		YES..1 NO...2>>F27		YES..1 NO...2		WEEKS		MK		DAY...3 WEEK...4 MONTH...5 YEAR...6		STRONGLY AGREE.....1 AGREE.....2 DISAGREE.....3 STRONGLY DISAGREE...4		YES..1 NO...2>>F31		YES..1 NO...2>>F31			

F29 What is the main reason for your household not to have access to electricity?		F30 How many weeks have you been waiting for?		F31 Is there a MTL telephone in working condition in the dwelling unit?		F32 What was the total cost for MTL telephone service in the household over the last period?		F33 To what length of time does this MTL telephone cost refer?		F34 How many working cell phones in total does your household own?		F35 Estimate the total cost for all cell phone service for all household members last month?		F35_1 Of this cost (F35), how much was spent on charging phone for all household members last month?		F35_2 Of this cost (F35), how much was spent on internet for all household members last month?		F35_3 Of this cost (F35), how much was spent on airtime for all household members last month?		F36 What is your main source of drinking water?		F36_1 What is the main source of water used by members of your household for other purposes such as cooking and handwashing?		F37 What was the total cost of drinking water for your household last month?		F38 How long does it take you to walk (ONE WAY) to the main water source from your dwelling?	
CONNECTION/ WIRING FEE UNAFFORDABLE..1>>F31 NO NEED FOR ELECTRICITY...2>>F31 DWELLING UNAPPROPRIATE FOR CONNECTION...3>>F31 APPLICATION PENDING...4 LINE WAS...5>>F31 DISCONNECTED...5>>F31 OTHER (SPECIFY).....6>>F31		DAY...3 WEEK...4 MONTH...5 YEAR...6		YES..1 NO...2>>F34		LAST BILL AMOUNT		DAY...3 WEEK...4 MONTH...5 YEAR...6		IF NONE, RECORD 0 AND >> F36.		IF NONE, RECORD 0 AND >> F36.		IF NONE, RECORD 0 AND >> F35_2.		IF NONE, RECORD 0 AND >> F35_3.		PIPED INTO DWELLING...1 PIPED INTO YARD/PLOT...2 PIPED TO NEIGHBOR.....17 COMMUNAL STANDPIPE...3 OPEN WELL IN YARD/PLOT...4 OPEN PUBLIC WELL...5 PROTECTED WELL IN YARD/PLOT...6 PROTECTED PUBLIC WELL...7 BOREHOLE...8 PROTECTED SPRING...9 UNPROTECTED SPRING...18 RIVER/STREAM...10 POND/LAKE...11 DAM...12 RAINWATER...13 TANKER TRUCK/BOWSER...14 BOTTLED WATER...15 OTHER (SPECIFY)...16		PIPED INTO DWELLING...1 PIPED INTO YARD/PLOT...2 PIPED TO NEIGHBOR.....17 COMMUNAL STANDPIPE...3 OPEN WELL IN YARD/PLOT...4 OPEN PUBLIC WELL...5 PROTECTED WELL IN YARD/PLOT...6 PROTECTED PUBLIC WELL...7 BOREHOLE...8 PROTECTED SPRING...9 UNPROTECTED SPRING...18 RIVER/STREAM...10 POND/LAKE...11 DAM...12 RAINWATER...13 TANKER TRUCK/BOWSER...14 BOTTLED WATER...15 OTHER (SPECIFY)...16		IF NONE, ENTER 0 AND CONTINUE TO F38.		MINUTE...1 HOUR...2			
TIME AMOUNT		TIME UNIT		MK		TIME AMOUNT		TIME UNIT		NUMBER		MK		MK		MK		MK		MK		MK		TIME AMOUNT		TIME UNIT	

F38_1 How long does it take to draw water from the source?		F39 Do you use the main water source... READ OUT RESPONSES		F40 What is your main source of drinking water in the other season?		F41 What kind of toilet facility do members of your household usually use?		F41_1 Has your [FACILITY] ever been emptied?		F41_2 The last time it was emptied, where were the contents emptied to?		F41_3 Where is this toilet facility located?		F41_4 Do you share this facility with others who are not members of your household?		F41_5 Do you share this facility only with members of other households that you know, or is the facility open to the use of the general public?		F41_6 How many households in total use this toilet facility, including your own household?		F42_1 Does this toilet have hand washing facility?		F43 What kind of rubbish disposal facilities does your household use?		F44 Do any members of your household sleep under a bed net to protect against mosquitoes at some time during the year?		F45 Has/have the bed net(s) ever been dipped in insecticide against mosquitoes in the past six months?		F46 ENUMERATOR: DOES THIS HOUSE HOLD HAVE ANY CHILDREN EN BELOW 5 YEARS OF AGE?		F47 Do the children under 5 in the household sleep under a bed net at those times of the year when there are mosquitoes present?	
ALL YEAR AROUND...1>>F41 ONLY RAINY SEASON...2 ONLY DRY SEASON...3		PIPED INTO DWELLING...1 PIPED INTO YARD/PLOT...2 PIPED TO NEIGHBOR.....17 COMMUNAL STANDPIPE...3 OPEN WELL IN YARD/PLOT...4 OPEN PUBLIC WELL...5 PROTECTED WELL IN YARD/PLOT...6 PROTECTED PUBLIC WELL...7 BOREHOLE...8 PROTECTED SPRING...9 UNPROTECTED SPRING...18 RIVER/STREAM...10 POND/LAKE...11 DAM...12 RAINWATER...13 TANKER TRUCK/BOWSER...14 BOTTLED WATER...15 OTHER (SPECIFY)...16		FLUSH TO PIPED SEWER SYSTEM...1>>F41_3 FLUSH TO SEPTIC TANK.....2 FLUSH TO PIT LATRINE.....3 FLUSH TO OPEN DRAIN.....4>>F41_3 FLUSH TO DK WHERE.....5>>F41_3 VENTILATED IMPROVED PIT LATRINE.....6 PIT LATRINE WITH SLAB.....7 PIT LATRINE WITHOUT SLAB / OPEN PIT.....8 COMPOSTING TOILET.....9 BUCKET.....10>>F41_3 HANGING TOILET / NO FACILITY / BUSH / FIELD.....12>>F41_3 OTHER (specify).....13>>F41_3		YES, EMPTIED...1 NO, NEVER EMPTIED...2>>F41_3		REMOVED BY SERVICE PROVIDER TO A TREATMENT PLANT...1 BURIED IN A COVERED PIT...2 TO DON'T KNOW WHERE...3 EMPTIED BY HOUSEHOLD BURIED IN A COVERED PIT...4 TO UNCOVERED PIT, OPEN GROUND, WATER BODY OR ELSEWHERE...5 OTHER (specify)...6 DON'T KNOW...7		IN OWN DWELLING...1 IN OWN YARD / PLOT...2 ELSEWHERE...3		YES..1 NO...2>>F42_1		SHARED WITH KNOWN HOUSEHOLDS (NOT PUBLIC)...1 SHARED WITH GENERAL PUBLIC...2 OTHER...3		NUMBER OF HOUSEHOLDS (IF LESS THAN 10).....1 TEN OR MORE HOUSEHOLDS.....2 DK.....3		COLLECTED FROM RUBBISH BIN...1 RUBBISH PIT...2 BURNING...3 PUBLIC RUBBISH HEAP...4 RIVER, SEA...5 GARDEN...6 COMPOST SOLID WASTE...7 OTHER (SPECIFY)...8 NONE...9		YES..1 NO...2>>F48		YES..1 NO...2 ALL NETS CREATED & LESS THAN 6 MONTHS OLD...3		YES..1 NO...2>>F48		YES FOR ALL CHILDREN UNDER FIVE...1 YES FOR SOME CHILDREN UNDER FIVE...2 NO, NONE OF THE CHILDREN UNDER FIVE...3					
TIME AMOUNT		TIME UNIT		MK		TIME AMOUNT		TIME UNIT		NUMBER		MK		MK		MK		MK		MK		MK		TIME AMOUNT		TIME UNIT					

MODULE F: HOUSING

<p>F48</p> <p>Do you, either by yourself or together with another household member or someone outside your household, currently have an account at a bank, credit union, micro finance institution, village savings organization, or another financial institution?</p> <p>YES..1 NO...2>>50</p>	<p>F49</p> <p>ENUMERATOR: RECORD THE HOUSEHOLD ROSTER ID OF THE RESPONDENT.</p> <p>HH ROSTER ID CODE</p>	<p>F50</p> <p>Does any other member of your household, either by him/herself or together with another household member or someone outside your household, currently have an account at a bank, credit union, micro finance institution, village savings organization, or another financial institution?</p> <p>YES..1 NO...2>>52</p>	<p>F51</p> <p>ENUMERATOR: RECORD THE HOUSEHOLD ROSTER ID CODE FOR UP TO 3 INDIVIDUALS, EXCLUDING THE RESPONDENT.</p> <p>HH ROSTER ID CODE #1</p> <p>HH ROSTER ID CODE #2</p> <p>HH ROSTER ID CODE #3</p>	<p>F52</p> <p>In the past year (12 months), have you used an account at a bank, credit union, etc. of someone else in your household or your community?</p> <p>YES..1 NO...2>>54</p>	<p>F53</p> <p>ENUMERATOR: RECORD THE HOUSEHOLD ROSTER ID OF THE RESPONDENT.</p> <p>HH ROSTER ID CODE</p>	<p>F54</p> <p>In the past year (12 months), has any other member of your household used an account at a bank, credit union, etc. of someone else in your household or your community ?</p> <p>YES..1 NO...2>>NEXT MODULE</p>	<p>F55</p> <p>ENUMERATOR: RECORD THE HOUSEHOLD ROSTER ID CODE FOR UP TO 3 INDIVIDUALS, EXCLUDING THE RESPONDENT.</p> <p>HH ROSTER ID CODE #1</p> <p>HH ROSTER ID CODE #2</p> <p>HH ROSTER ID CODE #3</p>
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ENUMERATOR: RECORD PRIMARY RESPONDENT ID FOR MODULE F:

ID

ENUMERATOR: RECORD END TIME FOR MODULE F:

HOURS	MINUTES

MODULE F 1: LAND ROSTER

F_1_0. Do you or does any member of your household own or hold use rights for any parcel of land, either alone or jointly with someone else, irrespective of whether the parcel is used by your or another household, and irrespective of the use of the parcel (including dwelling plot, agricultural, pastoral, forest and business/commercial plots)?

YES...1
 NO...2 >> END
 OF QUESTIONS

ENUMERATOR: AFTER CREATING THE ROSTER OF GARDENS, GO THROUGH THE ENTIRE MODULE ONE GARDEN AT A TIME.

GARDEN ID	RESPONDENT ID	1. GARDEN NAME Please tell me about each GARDEN for which you or any household member currently uses, owns or holds use rights for, either alone or with someone else. Please describe or give me the name of each GARDEN, starting with the GARDEN you reside on, if applicable.	1_1 Was the GPS measurement taken in the previous round? [PREFILLED]	1_2 Were you the household member that identified and walked around [GARDEN] boundaries for GPS-based area measurement in the last survey round?	1_3 Were you told the GPS-based area for [GARDEN] in the last survey round? YES, BY THE ENUMERATOR1 YES, BY ANOTHER HOUSEHOLD MEMBER.....2 NO....3	2. What is the area of this [GARDEN]?			2_1 Specify the household member that identified and walked around [GARDEN] boundaries for GPS-based area measurement.
						CODES FOR UNIT:		HH ROSTER ID CODE	
						ACRE.....1 HECTARE.....2 SQUARE METERS...3 OTHER (SPECIFY)..4	a. FARMER ESTIMATION AREA		
1			YES.....1 NO... ..2	YES.....1 NO... ..2		----- . ----		----- . ----	
2						----- . ----		----- . ----	
3						----- . ----		----- . ----	
4						----- . ----		----- . ----	
5						----- . ----		----- . ----	

ENUMERATOR: RECORD START DATE & TIME FOR MODULE

DAYS	MONTHS	HOURS	MINUTES

CODES FOR UNIT:

KILOGRAMME 1
 PAIL 4
 PAIL SMALL4A
 PAIL MEDIUM . . .4B
 PAIL LARGE 4C
 No 10 PLATE 6
 No 10 PLATE FLAT .6A
 No 10 PLATE HEAPED. . .6B
 No 12 PLATE7
 No 12 PLATE FLAT. 7A
 No 12 PLATE HEAPED. . .7B
 BUNCH SMALL8A
 BUNCH MEDIUM . . .8B
 BUNCH LARGE8C
 PIECE 9
 PIECE SMALL9A
 PIECE MEDIUM . . .9B
 PIECE LARGE9C
 HEAP 10
 HEAP SMALL10A
 HEAP MEDIUM . . .10B
 HEAP LARGE10C
 LITRE 15
 GRAM 18
 MILLILITRE19
 TEASPOON 20
 SATCHET/TUBE . . .22
 SATCHET/TUBE SMALL. . 22A
 SATCHET/TUBE MEDIUM. . 22B
 SATCHET/TUBE LARGE. . 22C
 OTHER (SPECIFY) . . 23
 TINA 25
 TINA FLAT 25A
 TINA HEAPED. . . 25B
 5 LITRE BUCKET (Chigoba). 26
 BASIN (SMALL) . . . 27A
 BASIN (SMALL) FLAT27D
 BASIN (SMALL) HEAPED. . . 27E
 LOAF (300g) 31
 LOAF (600g) 32
 LOAF (700g) 33
 PACKET (150g) . . . 34
 PACKET (400g) . . . 35
 PACKET (500g) . . . 36
 PACKET (1KG) 37
 SATCHET/TUBE (25g) . . 41
 SATCHET/TUBE (50g) . . 42
 SATCHET/TUBE (100g) . . 43
 CLUSTER 44
 CLUSTER SMALL . . . 44A
 CLUSTER MEDIUM . . 44B
 CLUSTER LARGE . . . 44C
 PACKET 51
 PACKET (SMALL) . . . 54
 PACKET (LARGE) . . . 55
 TABLESPOON 59
 PACKET 60
 PACKET (250g) . . . 65
 PACKET (25g) 70
 TIN 100g 71
 TIN 250g 72
 TIN 500g 73

G00_1. Who in the household is most knowledgeable about food consumed in the household. LIST MEMBER ID.

G00_2. Who in the household is reporting information on food consumption in this module. LIST MEMBER ID.

	G01 Over the past one week (7 days), did you or others in your household consume any [. .]? INCLUDE FOOD BOTH EATEN COMMUNALLY IN THE HOUSEHOLD AND THAT EATEN SEPARATELY BY INDIVIDUAL HOUSEHOLD MEMBERS. YES . . 1 NO . . . 2 >> NEXT ITEM	G02	G03 How much in total did your household consume in the past week?	G04 How much came from purchases?		G05 How much did you spend?		G06 How much came from own-production?		G07 How much came from gifts and other sources?	
				ITEM CODE	QUANTITY	UNIT	QUANTITY	UNIT	MK	QUANTITY	UNIT
Cereals, Grains and Cereal Products											
Maize <i>ufa mgaiwa</i> (normal flour) *		101									
Maize <i>ufa</i> refined (fine flour) *		102									
Maize <i>ufa madeya</i> (bran flour) *		103									
Maize grain (not as <i>ufa</i>) *		104									
Green maize *		105									
Rice		106									
Finger millet (<i>mawere</i>)		107									
Sorghum (<i>mapira</i>)		108									
Pearl millet (<i>mchewere</i>)		109									
Wheat flour		110									
Bread		111									
Buns, scones		112									
Biscuits		113									
Spaghetti, macaroni, pasta		114									
Breakfast cereal		115									
Infant feeding cereals		116									
Other (specify)		117									

* ENUMERATOR: PLEASE SPECIFY SUB-UNIT CODE FOR ITEM. REFER TO PHOTO AID

	G01 Over the past one week (7 days), did you or others in your household consume any [..]? INCLUDE FOOD BOTH EATEN COMMUNALLY IN THE HOUSEHOLD AND THAT EATEN SEPARATELY BY INDIVIDUAL HOUSEHOLD MEMBERS. YES..1 NO...2>> NEXT ITEM	G02 ITEM CODE	G03 How much in total did your household consume in the past week?		G04 How much came from purchases?		G05 How much did you spend?		G06 How much came from own-production?		G07 How much came from gifts and other sources?		CODES FOR UNIT:
			QUANTITY	UNIT	QUANTITY	UNIT	QUANTITY	UNIT	QUANTITY	UNIT	QUANTITY	UNIT	
Roots, Tubers, and Plantains													
Cassava tubers *		201											KILOGRAMME.1
Cassava flour		202											PAIL.4
White sweet potato *		203											PAIL SMALL. . . .4A
Orange sweet potato *		204											PAIL MEDIUM. . . .4B
Irish potato*		205											PAIL LARGE. . . .4C
Potato crisps		206											No 10 PLATE. . . .6
Plantain, cooking banana*		207											No 10 PLATE FLAT. .6A
Cocoyam (<i>masimbi</i>)		208											No 10 PLATE HEAPED. .6B
Other (specify)		209											No 12 PLATE. . . .7
Nuts and Pulses													
Bean, white*		301											No 12 PLATE FLAT. 7A
Bean, brown *		302											No 12 PLATE HEAPED. .7B
Pigeonpea (<i>nandolo</i>) *		303											BUNCH SMALL. . . .8A
Groundnut (Shelled)*		304A											BUNCH MEDIUM. . . .8B
Groundnut - dried (Unshelled)*		304B											BUNCH LARGE. . . .8C
Groundnut - fresh (Unshelled)		304C											PIECE.9
Groundnut flour *		305											PIECE SMALL. . . .9A
Soyabean flour		306											PIECE MEDIUM. . . .9B
Ground bean (<i>nzama</i>)		307											PIECE LARGE. . . .9C
Cowpea (<i>khobwe</i>)		308											HEAP.10
Macademia nuts		309											HEAP SMALL. . . .10A
Other (specify)		310											HEAP MEDIUM. . . .10B
													HEAP LARGE. . . .10C
													LITRE.15
													GRAM.18
													MILLILITRE. . . .19
													TEASPOON.20
													SATCHET/TUBE. . . .22
													SATCHET/TUBE SMALL. . .22A
													SATCHET/TUBE MEDIUM. . .22B
													SATCHET/TUBE LARGE. . .22C
													OTHER (SPECIFY) . . .23
													TINA.25
													TINA FLAT. . . .25A
													TINA HEAPED. . . .25B
													5 LITRE BUCKET (Chigoba). 26
													BASIN (SMALL) . . .27A
													BASIN (SMALL) FLAT. . . .27D
													BASIN (SMALL) HEAPED. . .27E
													LOAF (300G)31
													LOAF (600G)32
													LOAF (700G)33
													PACKET (150G)34
													PACKET (400G)35
													PACKET (500G)36
													PACKET (1KG)37
													SATCHET/TUBE (25G) . . .41
													SATCHET/TUBE (50G) . . .42
													SATCHET/TUBE (100G) . . .43
													CLUSTER.44
													CLUSTER SMALL. . .44A
													CLUSTER MEDIUM. . .44B
													CLUSTER LARGE. . .44C
													PACKET.51
													PACKET (SMALL) . . .54
													PACKET (LARGE) . . .55
													TABLESPOON. . . .59
													PACKET.60
													PACKET (250G) . . .65
													PACKET (25g)70
													TIN 100G.71
													TIN 250G.72
													TIN 500G.73

* ENUMERATOR: PLEASE SPECIFY SUB-UNIT CODE FOR ITEM. REFER TO PHOTO AID

	Over the past one week (7 days), did you or others in your household consume any [..]? INCLUDE FOOD BOTH EATEN COMMUNALLY IN THE HOUSEHOLD AND THAT EATEN SEPARATELY BY INDIVIDUAL HOUSEHOLD MEMBERS.	G01 YES..1 NO...2>> NEXT ITEM	G02 ITEM CODE	G03 How much in total did your household consume in the past week?		G04 How much came from purchases?		G05 How much did you spend?		G06 How much came from own-production?		G07 How much came from gifts and other sources?	
				QUANTITY	UNIT	QUANTITY	UNIT	QUANTITY	UNIT	QUANTITY	UNIT	QUANTITY	UNIT
Vegetables													
	Onion *		401										
	Cabbage *		402										
	Tanaposi/Rape *		403										
	Nkhwani *		404										
	Chinese cabbage		405										
	Other cultivated green leafy vegetables		406										
	Gathered wild green leaves		407										
	Tomato *		408										
	Cucumber*		409										
	Pumpkin *		410										
	Okra / Therere *		411										
	Tinned vegetables (specify)		412										
	Mushroom		413										
	Other vegetables (specify)		414										
Meat, Fish and Animal products													
	Eggs		501										
	Dried fish *		502										
	Fresh fish *		503										
	Beef		504										
	Goat		505										

CODES FOR UNIT:

KILOGRAMME.1
 PAIL.4
 PAIL SMALL. . . .4A
 PAIL MEDIUM. . .4B
 PAIL LARGE. . . .4C
 No 10 PLATE. . . .6
 No 10 PLATE FLAT. .6A
 No 10 PLATE HEAPED. .6B
 No 12 PLATE. . . .7
 No 12 PLATE FLAT. 7A
 No 12 PLATE HEAPED. .7B
 BUNCH SMALL. . . .8A
 BUNCH MEDIUM. . .8B
 BUNCH LARGE. . . .8C
 PIECE.9
 PIECE SMALL. . . .9A
 PIECE MEDIUM. . .9B
 PIECE LARGE. . . .9C
 HEAP.10
 HEAP SMALL. . . .10A
 HEAP MEDIUM. . .10B
 HEAP LARGE. . . .10C
 LITRE.15
 GRAM.18
 MILLILITRE. . . .19
 TEASPOON.20
 SATCHET/TUBE. . .22
 SATCHET/TUBE SMALL. .22A
 SATCHET/TUBE MEDIUM. .22B
 SATCHET/TUBE LARGE. .22C
 OTHER (SPECIFY). .23
 TINA.25
 TINA FLAT. . . .25A
 TINA HEAPED. . .25B
 5 LITRE BUCKET (Chigoba). 26
 BASIN (SMALL). . .27A
 BASIN (SMALL) FLAT. . . .27D
 BASIN (SMALL) HEAPED. .27E
 LOAF (300G). . . .31
 LOAF (600G). . . .32
 LOAF (700G). . . .33
 PACKET (150G). . .34
 PACKET (400G). . .35
 PACKET (500G). . .36
 PACKET (1KG). . . .37
 SATCHET/TUBE (25G). .41
 SATCHET/TUBE (50G). .42
 SATCHET/TUBE (100G). .43
 CLUSTER.44
 CLUSTER SMALL. .44A
 CLUSTER MEDIUM. .44B
 CLUSTER LARGE. .44C
 PACKET.51
 PACKET (SMALL). .54
 PACKET (LARGE). .55
 TABLESPOON. . .59
 PACKET.60
 PACKET (250G). .65
 PACKET (25g). . . .70
 TIN 100G.71
 TIN 250G.72
 TIN 500G.73

* ENUMERATOR: PLEASE SPECIFY SUB-UNIT CODE FOR ITEM. REFER TO PHOTO AID

	G01 Over the past one week (7 days), did you or others in your household consume any [. .]? INCLUDE FOOD BOTH EATEN COMMUNALLY IN THE HOUSEHOLD AND THAT EATEN SEPARATELY BY INDIVIDUAL HOUSEHOLD MEMBERS. YES..1 NO...2>> NEXT ITEM	G02 ITEM CODE	G03 How much in total did your household consume in the past week?		G04 How much came from purchases?		G05 How much did you spend?		G06 How much came from own-production?		G07 How much came from gifts and other sources?	
			QUANTITY	UNIT	QUANTITY	UNIT	MK	QUANTITY	UNIT	QUANTITY	UNIT	
Meat, Fish and Animal products (Continued)												
Pork		506										
Mutton		507										
Chicken		508										
Other poultry - guinea fowl, doves, etc.		509										
Small animal – rabbit, mice, etc.		510										
Termites, other insects (eg Ngumbi, caterpillar)		511										
Tinned meat or fish		512										
Smoked fish*		513										
Fish Soup/Sauce		514										
Other (specify)		515										
Fruits												
Mango *		601										
Banana *		602										
Citrus – naartje, orange, etc.		603										
Pineapple		604										
Papaya		605										
Guava *		606										
Avocado		607										
Wild fruit (<i>masau, malambe, etc.</i>)		608										
Apple		609										
Other fruits (specify)		610										

CODES FOR UNIT:

KILOGRAMME.	1
PAIL.	4
PAIL SMALL.	4A
PAIL MEDIUM.	4B
PAIL LARGE.	4C
No 10 PLATE.	6
No 10 PLATE FLAT.	6A
No 10 PLATE HEAPED.	6B
No 12 PLATE.	7
No 12 PLATE FLAT.	7A
No 12 PLATE HEAPED.	7B
BUNCH SMALL.	8A
BUNCH MEDIUM.	8B
BUNCH LARGE.	8C
PIECE.	9
PIECE SMALL.	9A
PIECE MEDIUM.	9B
PIECE LARGE.	9C
HEAP.	10
HEAP SMALL.	10A
HEAP MEDIUM.	10B
HEAP LARGE.	10C
LITRE.	15
GRAM.	18
MILLILITRE.	19
TEASPOON.	20
SATCHET/TUBE.	22
SATCHET/TUBE SMALL.	22A
SATCHET/TUBE MEDIUM.	22B
SATCHET/TUBE LARGE.	22C
OTHER (SPECIFY).	23
TINA.	25
TINA FLAT.	25A
TINA HEAPED.	25B
5 LITRE BUCKET (Chigoba).	26
BASIN (SMALL).	27A
BASIN (SMALL) FLAT.	27D
BASIN (SMALL) HEAPED.	27E
LOAF (300G).	31
LOAF (600G).	32
LOAF (700G).	33
PACKET (150G).	34
PACKET (400G).	35
PACKET (500G).	36
PACKET (1KG).	37
SATCHET/TUBE (25G).	41
SATCHET/TUBE (50G).	42
SATCHET/TUBE (100G).	43
CLUSTER.	44
CLUSTER SMALL.	44A
CLUSTER MEDIUM.	44B
CLUSTER LARGE.	44C
PACKET.	51
PACKET (SMALL).	54
PACKET (LARGE).	55
TABLESPOON.	59
PACKET.	60
PACKET (250G).	65
PACKET (25g).	70
TIN 100G.	71
TIN 250G.	72
TIN 500G.	73

	G01 Over the past one week (7 days), did you or others in your household consume any [...]? INCLUDE FOOD BOTH EATEN COMMUNALLY IN THE HOUSEHOLD AND THAT EATEN SEPARATELY BY INDIVIDUAL HOUSEHOLD MEMBERS. YES...1 NO...2>> NEXT ITEM	G02	G03 How much in total did your household consume in the past week?		G04 How much came from purchases?		G05 How much did you spend?		G06 How much came from own-production?		G07 How much came from gifts and other sources?	
			ITEM CODE	QUANTITY	UNIT	QUANTITY	UNIT	MK	QUANTITY	UNIT	QUANTITY	UNIT
Cooked Foods from Vendors												
Maize - boiled or roasted (vendor)		820										
Chips (vendor)		821										
Cassava - boiled (vendor)		822										
Eggs - boiled (vendor)		823										
Chicken (vendor)		824										
Meat (vendor)		825										
Fish (vendor)		826										
Mandazi, doughnut (vendor)		827										
Samosa (vendor)		828										
Meal eaten at restaurant		829										
Boiled sweet potatoes		831										
Roasted sweet potatoes		832										
Boiled groundnuts		833										
Roasted groundnuts		834										
Popcorn		835										
Zikondamoyo / Nkate		836										
KALONGONDA (Mucuna)		837										
Other (specify)		830										
Milk and Milk Products												
Fresh milk		701										
Powdered milk		702										
Margarine - Blue band		703										
Butter		704										
Chambiko - soured milk		705										
Yoghurt		706										
Cheese		707										
Infant feeding formula (for bottle)		708										
Other (specify)		709										

CODES FOR UNIT:

KILOGRAMME.1
 PAIL.4
 PAIL SMALL. . . .4A
 PAIL MEDIUM. . .4B
 PAIL LARGE. . . .4C
 No 10 PLATE. . . .6
 No 10 PLATE FLAT. .6A
 No 10 PLATE HEAPED. .6B
 No 12 PLATE. . . .7
 No 12 PLATE FLAT. 7A
 No 12 PLATE HEAPED. .7B
 BUNCH SMALL. . . .8A
 BUNCH MEDIUM. . .8B
 BUNCH LARGE. . . .8C
 PIECE.9
 PIECE SMALL. . . .9A
 PIECE MEDIUM. . .9B
 PIECE LARGE. . . .9C
 HEAP.10
 HEAP SMALL. . . .10A
 HEAP MEDIUM. . .10B
 HEAP LARGE. . . .10C
 LITRE.15
 GRAM.18
 MILLILITRE. . . .19
 TEASPOON. . . .20
 SATCHET/TUBE. . .22
 SATCHET/TUBE SMALL. .22A
 SATCHET/TUBE MEDIUM. .22B
 SATCHET/TUBE LARGE. .22C
 OTHER (SPECIFY). .23
 TINA.25
 TINA FLAT. . . .25A
 TINA HEAPED. . . .25B
 5 LITRE BUCKET(Chigoba). 26
 BASIN (SMALL). . .27A
 BASIN (SMALL) FLAT.27D
 BASIN (SMALL) HEAPED. .27E
 LOAF (300G). . . .31
 LOAF (600G). . . .32
 LOAF (700G). . . .33
 PACKET (150G). . .34
 PACKET (400G). . .35
 PACKET (500G). . .36
 PACKET (1KG). . . .37
 SATCHET/TUBE (25G). . .41
 SATCHET/TUBE (50G). . .42
 SATCHET/TUBE (100G). .43
 CLUSTER.44
 CLUSTER SMALL. . .44A
 CLUSTER MEDIUM. .44B
 CLUSTER LARGE. . .44C
 PACKET.51
 PACKET (SMALL). . .54
 PACKET (LARGE). . .55
 TABLESPOON. . . .59
 PACKET.60
 PACKET (250G). . .65
 PACKET (25g). . . .70
 TIN 100G.71
 TIN 250G.72
 TIN 500G.73

	G01 Over the past one week (7 days), did you or others in your household consume any [...]? INCLUDE FOOD BOTH EATEN COMMUNALLY IN THE HOUSEHOLD AND THAT EATEN SEPARATELY BY INDIVIDUAL HOUSEHOLD MEMBERS. YES...1 NO...2>> NEXT ITEM	G02	G03 How much in total did your household consume in the past week?		G04 How much came from purchases?		G05 How much did you spend?		G06 How much came from own-production?		G07 How much came from gifts and other sources?	
			ITEM CODE	QUANTITY	UNIT	QUANTITY	UNIT	MK	QUANTITY	UNIT	QUANTITY	UNIT
Sugar, Fats, and Oil												
Sugar		801										
Sugar Cane		802										
Cooking oil *		803										
Other (specify)		804										
Beverages												
Tea		901										
Coffee		902										
Cocoa, millo		903										
Squash (Sobo drink concentrate)		904										
Fruit juice		905										
Freezes (flavoured ice)		906										
Soft drinks (Coca-cola, Fanta, Sprite, etc.)		907										
Chibuku (commercial traditional-style beer)		908										
Bottled water		909										
Maheu		910										
Bottled / canned beer (Carlsberg, etc.)		911										
Thobwa		912										
Traditional beer (masese)		913										
Wine or commercial liquor		914										
Locally brewed liquor (kachasu)		915										
Other (specify)		916										

CODES FOR UNIT:

KILOGRAMME.1
 PAIL.4
 PAIL SMALL. . . .4A
 PAIL MEDIUM. . .4B
 PAIL LARGE. . . .4C
 No 10 PLATE. . . .6
 No 10 PLATE FLAT.6A
 No 10 PLATE HEAPED. . .6B
 No 12 PLATE. . . .7
 No 12 PLATE FLAT. 7A
 No 12 PLATE HEAPED. . .7B
 BUNCH SMALL. . . .8A
 BUNCH MEDIUM. . . .8B
 BUNCH LARGE. . . .8C
 PIECE.9
 PIECE SMALL. . . .9A
 PIECE MEDIUM. . . .9B
 PIECE LARGE. . . .9C
 HEAP.10
 HEAP SMALL. . . .10A
 HEAP MEDIUM. . . .10B
 HEAP LARGE. . . .10C
 LITRE.15
 GRAM.18
 MILLILITRE. . . .19
 TEASPOON.20
 SATCHET/TUBE. . . .22
 SATCHET/TUBE SMALL. . .22A
 SATCHET/TUBE MEDIUM. . .22B
 SATCHET/TUBE LARGE. . .22C
 OTHER (SPECIFY) . . .23
 TINA.25
 TINA FLAT. . . .25A
 TINA HEAPED. . . .25B
 5 LITRE BUCKET (Chigoba). 26
 BASIN (SMALL). . .27A
 BASIN (SMALL) FLAT. . . .27D
 BASIN (SMALL) HEAPED. . .27E
 LOAF (300G)31
 LOAF (600G)32
 LOAF (700G)33
 PACKET (150G) . . .34
 PACKET (400G) . . .35
 PACKET (500G) . . .36
 PACKET (1KG)37
 SATCHET/TUBE (25G) . . .41
 SATCHET/TUBE (50G) . . .42
 SATCHET/TUBE (100G) . . .43
 CLUSTER.44
 CLUSTER SMALL. . .44A
 CLUSTER MEDIUM. . .44B
 CLUSTER LARGE. . .44C
 PACKET.51
 PACKET (SMALL) . . .54
 PACKET (LARGE) . . .55
 TABLESPOON. . . .59
 PACKET.60
 PACKET (250G) . . .65
 PACKET (25g)70
 TIN 100G.71
 TIN 250G.72
 TIN 500G.73

	G01 Over the past one week (7 days), did you or others in your household consume any [. .]? INCLUDE FOOD BOTH EATEN COMMUNALLY IN THE HOUSEHOLD AND THAT EATEN SEPARATELY BY INDIVIDUAL HOUSEHOLD MEMBERS.	G02 YES . . 1 NO . . . 2>> NEXT ITEM	G03 How much in total did your household consume in the past week?	G04 How much came from purchases?	G05 How much did you spend?	G06 How much came from own-production?	G07 How much came from gifts and other sources?	ITEM			
								CODE	QUANTITY	UNIT	QUANTITY
Spices & Miscellaneous											
	Salt *		810								
	Spices		811								
	Yeast, baking powder, bicarbonate of soda		812								
	Tomato sauce (bottle)		813								
	Hot sauce (Nali, etc.)		814								
	Jam, jelly		815								
	Sweets, candy, chocolates		816								
	Honey		817								
	Other (specify)		818								

* ENUMERATOR: PLEASE SPECIFY SUB-UNIT CODE FOR ITEM. REFER TO PHOTO AID

MODULE G: FOOD CONSUMPTION OVER PAST ONE WEEK

(CONTINUED)

		G08. Over the past one week (7 days), how many days did you or others in your household consume any [...]?
		IF NOT CONSUMED, RECORD ZERO.
		NUMBER OF DAYS
A	Cereals, Grains and Cereal Products (Previous Page: 100s) (Maize Grain/Flour; Green Maize; Rice; Finger Millet; Pearl Millet; Sorghum; Wheat Flour; Bread; Pasta; Other Cereal)	
B	Roots, Tubers, and Plantains [Previous Page: 200] (Cassava Tuber/Flour; Sweet Potato; Irish Potato; Other Tuber/Plantain)	
C	Nuts and Pulses [Previous Page: 300s] (Bean; Pigeon Pea; Macademia Nut; Groundnut; Ground Bean; Cow Pea; Other Nut/Pulse)	
D	Vegetables [Previous Page: 400s] (Onion; Cabbage; Tanaposi; Nkhwani; Wild Green Leaves; Tomato; Cucumber; Other Vegetables/Leaves)	
E	Meat, Fish and Animal Products [Previous Page: 500s] Egg; Dried/Fresh/Smoked Fish (Excluding Fish Sauce/Powder); Beef; Goat Meat; Pork; Poultry; Other Meat)	
F	Fruits [Previous Page: 600s] (Mango; Banana; Citrus; Pineapple; Papaya; Guava; Avocado; Apple; Other Fruit)	
G	Milk/Milk Products [Previous Page: 700s] (Fresh/Powdered/Soured Milk; Yogurt; Cheese; Other Milk Product - Excluding Margarine/Butter or Small Amounts of Milk for Tea/Coffee)	
H	Fats/Oil [Previous Page: 703, 704, 803, 804 (if app.)] (Cooking Oil; Butter; Margarine; Other Fat/Oil)	
I	Sugar/Sugar Products/Honey [Previous Page: 801, 802, 804 (if app.), 815, 816, 817, 817 (if app.)] (Sugar; Sugar Cane; Honey; Jam; Jelly; Sweets/Candy/Chocolate; Other Sugar Product)	
J	Spices/Condiments [Previous Page: 900s, 810-814, 817 (if app.)] (Tea; Coffee/Cocoa/Millop; Salt; Spices; Yeast/Baking Powder; Tomato/Hot Sauce; Fish Powder/Sauce; Other Condiment - Including Small Amounts of Milk for Tea/Coffee)	

G09. Over the past one week (7 days), did any people that you did not list as household members [READ LIST FROM HH ROSTER] eat any meals in your household?

YES...1

NO...2>> NEXT MODULE

	G10	G11
For G10-G11: IF NOT SHARED, RECORD ZERO.	What was the total number of days in which any meal was shared with people [...]?	What was the total number of meals that were shared over past 7 days with [...]?
	NUMBER OF DAYS	NUMBER OF MEALS
A Children 0-5 years		
B Children 6-15 years		
C Adults 16-65 years		
D People over 65 years old		

ENUMERATOR: RECORD PRIMARY RESPONDENT ID FOR MODULE G:

ID

ENUMERATOR: RECORD END TIME FOR MODULE G:

HOURS MINUTES

MODULE H: FOOD SECURITY

ENUMERATOR: RECORD START DATE & TIME FOR MODULE H:

DAY	MONTH	HOURS	MINUTES

H01 In the past 7 days, did you worry that your household would not have enough food? YES...1 NO...2	H02 In the past 7 days, how many days have you or someone in your household had to: IF NO DAYS, RECORD ZERO. <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 15%; text-align: center; font-size: 8px;">a. Rely on less preferred and/or less expensive foods?</td> <td style="width: 15%; text-align: center; font-size: 8px;">b. Limit portion size at meal-times?</td> <td style="width: 15%; text-align: center; font-size: 8px;">c. Reduce number of meals eaten in a day?</td> <td style="width: 15%; text-align: center; font-size: 8px;">d. Restrict consumption by adults in order for small children to eat?</td> <td style="width: 15%; text-align: center; font-size: 8px;">e. Borrow food, or rely on help from a friend or relative?</td> </tr> <tr> <td style="text-align: center; font-size: 8px;">DAYS</td> </tr> </table>	a. Rely on less preferred and/or less expensive foods?	b. Limit portion size at meal-times?	c. Reduce number of meals eaten in a day?	d. Restrict consumption by adults in order for small children to eat?	e. Borrow food, or rely on help from a friend or relative?	DAYS	DAYS	DAYS	DAYS	DAYS	H03 How many meals, including breakfast are taken per day in your household? <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 33%; text-align: center; font-size: 8px;">a. Adults</td> <td style="width: 33%; text-align: center; font-size: 8px;">b. Children (5-17 Yrs of Age)</td> <td style="width: 33%; text-align: center; font-size: 8px;">c. Children (6-59 months) LEAVE BLANK IF NO CHILDREN</td> </tr> <tr> <td style="text-align: center; font-size: 8px;">NUMBER</td> <td style="text-align: center; font-size: 8px;">NUMBER</td> <td style="text-align: center; font-size: 8px;">NUMBER</td> </tr> </table>	a. Adults	b. Children (5-17 Yrs of Age)	c. Children (6-59 months) LEAVE BLANK IF NO CHILDREN	NUMBER	NUMBER	NUMBER	H04 In the last 12 months, have you been faced with a situation when you did not have enough food to feed the household? YES..1 NO..2 >>NEXT MODULE
a. Rely on less preferred and/or less expensive foods?	b. Limit portion size at meal-times?	c. Reduce number of meals eaten in a day?	d. Restrict consumption by adults in order for small children to eat?	e. Borrow food, or rely on help from a friend or relative?															
DAYS	DAYS	DAYS	DAYS	DAYS															
a. Adults	b. Children (5-17 Yrs of Age)	c. Children (6-59 months) LEAVE BLANK IF NO CHILDREN																	
NUMBER	NUMBER	NUMBER																	

- CODES FOR H06:**
- Inadequate household stocks due to drought/ poor rains.....1
 - Inadequate household food stocks due to crop pest damage.....2
 - Inadequate household food stocks due to small land size.....3
 - Inadequate household food stocks due to lack of farm inputs...4
 - Food in the market was very expensive.....5
 - Unable to reach the market due to high transportation costs.....6
 - No food in the market.....7
 - Floods/water logging.....8
 - Insufficient funds....9

H05
 When did you experience this incident in the last 12 months?
 MARK X IN EACH MONTH OF 2018 AND 2019 THAT THE HOUSEHOLD DID NOT HAVE ENOUGH FOOD
 LEAVE CELL BLANK FOR FUTURE MONTHS FROM INTERVIEW DATE OR MONTHS MORE THAN 12 MONTHS AGO FROM INTERVIEW DATE.

2018									2019		
Apr	May	June	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar

2019									2020						
Apr	May	June	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	a. 1ST	b. 2ND	c. 3RD

ENUMERATOR: RECORD PRIMARY RESPONDENT ID FOR MODULE H:

ID

ENUMERATOR: RECORD END TIME FOR MODULE H:

HOURS	MINUTES

MODULE I: NON-FOOD EXPENDITURES – OVER PAST ONE WEEK & ONE MONTH

ENUMERATOR: RECORD START DATE & TIME FOR MODULE I:

DAY	MONTH	HOURS	MINUTES

ONE WEEK RECALL

DATA ENTRY LINE NUMBER	Over the past <u>one week (7 days)</u> , did your household purchase or pay for any [...]?	I01	I02	I03	DATA ENTRY LINE NUMBER
		YES .1 NO . . 2>>NEXT ITEM	ITEM CODE	How much did you pay in total? MK	
1	Charcoal		101		1
2	Paraffin or kerosene		102		2
3	Cigarettes or other tobacco		103		3
4	Candles		104		4
5	Matches		105		5
6	Newspapers or magazines		106		6
7	Public transport - Bicycle Taxi		107		7
8	Public transport - Bus/Minibus		108		8
9	Public transport - Other (Truck, Oxcart, Etc..)		109		9

ONE MONTH RECALL

DATA ENTRY LINE NUMBER	Over the past <u>one month</u> , did your household purchase or pay for any [...]?	I04	I05	I06	DATA ENTRY LINE NUMBER
		YES .1 NO . . 2>>NEXT ITEM	ITEM CODE	How much did you pay in total? MK	
1	Milling fees, grain		201		1
2	Bar soap (body soap or clothes soap)		202		2
3	Clothes soap (powder, paste)		203		3
4	Toothpaste, toothbrush		204		4
5	Toilet paper		205		5
6	Glycerine, Vaseline, skin creams		206		6
7	Other personal products (shampoo, razor blades, cosmetics, hair products, etc.)		207		7
8	Light bulbs		208		8
9	Postage stamps or other postal fees		209		9
10	Donation - to church, charity, beggar, etc.		210		10
11	Diesel		211		11
12	Petrol		212		12
13	Motor vehicle spare parts and accessories		213		13
14	Bicycle spare parts and accessories		214		14
15	Motor vehicle maintenance and repairs		215		15
16	Bicycle service maintenance and repairs		216		16
17	Wages paid to servants		217		17
18	Mortgage - regular payment to purchase house		218		18
19	Repairs & maintenance to dwelling		219		19
20	Repairs to household and personal items (radios, watches, etc., excluding battery		220		20
21	Expenditures on pets		221		21
22	Batteries (wireless and cell phones)		222		22
23	Recharging batteries, cell phones		223		23
24	Shoe polish		224		23
25	Hair dressing salons and barber shops		225		23

ENUMERATOR: RECORD
PRIMARY RESPONDENT
ID FOR MODULE I:

ID	ENUMERATOR: RECORD END TIME FOR MODULE I:	HOURS	MINUTES

**MODULE J: NON-FOOD EXPENDITURES
OVER PAST THREE MONTHS**

ENUMERATOR: RECORD START DATE & TIME FOR MODULE J:

DAY	MONTH	HOURS	MINUTES

Over the past three months, did your household purchase or pay for any [...]?	J01	J02	J03
	YES. 1 NO. . 2>>NEXT ITEM	ITEM CODE	MK
Infant clothing		301	
Baby nappies/diapers		302	
Boy's trousers		303	
Boy's shirts		304	
Boy's jackets		305	
Boy's undergarments		306	
Boy's other clothing		307	
Men's trousers		308	
Men's shirts		309	
Men's jackets		310	
Men's undergarments		311	
Men's other clothing		312	
Girl's blouse/shirt		313	
Girl's dress/skirt		314	
Girl's undergarments		315	
Girl's other clothing		316	
Lady's blouse/shirt		317	
Chitenje cloth		318	
Lady's dress/skirt		319	
Lady's undergarments		320	
Plastic Basin		321	

Over the past three months, did your household purchase or pay for any [...]?	J01	J02	J03
	YES. 1 NO. . 2>>NEXT ITEM	ITEM CODE	MK
Lady's other clothing		322	
Boy's shoes		323	
Men's shoes		324	
Girl's shoes		325	
Lady's shoes		326	
Cloth, thread, other sewing material		327	
Laundry, dry cleaning, tailoring fees		328	
Bowls, glassware, plates, silverware, etc.		329	
Cooking utensils (cookpots, stirring spoons and whisks, etc.)		330	
Cleaning utensils (brooms, brushes, etc.)		331	
Torch / flashlight		332	
Umbrella		333	
Paraffin lamp (hurricane or pressure)		334	
Stationery items (not for school)		335	
Books (not for school)		336	
Music or video cassette or CD/DVD		337	
Tickets for sports / entertainment events		338	
House decorations		339	
Night's lodging in rest house		340	
Night's lodging in hotel		341	
Flask		342	

ENUMERATOR:
RECORD
PRIMARY
RESPONDENT
ID FOR MODULE J:

ID

ENUMERATOR:
RECORD
END TIME
FOR MODULE J:

HOURS	MINUTES

MODULE K: NON-FOOD EXPENDITURES OVER PAST 12 MONTHS

Over the past one year (twelve months), did your household purchase or pay for any [...]?	K01 YES . 1 NO . . 2 >> NEXT ITEM	K02	K03 How much did you pay in total? MK
		ITEM CODE	
Carpet, rugs, drapes, curtains		401	
Linen - towels, sheets, blankets		402	
Mat - sleeping or for drying maize flour		403	
Mosquito net		404	
Mattress		405	
Sports & hobby equipment, musical instruments, toys		406	
Film, film processing, camera		407	
Cement		408	
Paint		409	
Bricks		410	
Construction timber		411	
Council rates		412	
Insurance - health (MASM, etc.), auto, home, life		413	
Losses to theft (value of items or cash lost)		414	
Fines or legal fees		415	
Lobola (bridewealth) costs		416	
Marriage ceremony costs		417	
Funeral costs, household members		418	
Funeral costs, nonhousehold members (relatives, neighbors/friends)		419	

ENUMERATOR: RECORD START DATE & TIME FOR MODULE K:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
DAY	MONTH	HOURS	MINUTES

NON-FOOD ITEMS THAT MAY NOT HAVE BEEN PURCHASED

Over the past one year (twelve months) did your household gather, purchase, or pay for any [...]?	K01 YES . 1 NO . . 2 >> NEXT ITEM	K02	K03 What was the estimated total value of [...] consumed? MK	K04 What was the cost of that which you purchased? MK
		ITEM CODE		
Woodpoles, bamboo		420		
Grass for thatching roof or other use		421		

ENUMERATOR: RECORD PRIMARY RESPONDENT ID FOR MODULE K:

<input type="text"/>
ID

ENUMERATOR: RECORD END TIME FOR MODULE K:

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

MODULE L: DURABLE GOODS

ENUMERATOR: RECORD START DATE & TIME
FOR MODULE L:

DAY	MONTH	HOURS	MINUTES

ITEM	L01 Does your household own a [ITEM]?	L02 D G U O R O A D B L E	L03 How many [ITEM]s do you own?	L04 What is the age of this [ITEM]?	L05 If you wanted to sell one of this [ITEM] today, how much would you receive?	L06 Did you purchase or pay for any [ITEM] in the last 12 months?	L07 How much in total did pay for [ITEM] in the last 12 months?
	YES..1 NO...2 >> NEXT ITEM	ITEM CODE	NUMBER	YEARS	MK	YES..1 NO...2 >> NEXT ITEM	MK
Mortar/pestle (<i>mtondo</i>)		501					
Bed		502					
Table		503					
Chair		504					
Fan		505					
Air conditioner		506					
Radio ('wireless')		507					
Radio with flash drive/micro CD		5801					
Tape or CD/DVD player; HiFi		508					
Television		509					
VCR		510					
Sewing machine		511					
Kerosene/paraffin stove		512					
Electric or gas stove; hot plate, cooker		513					
Refrigerator		514					
Washing machine		515					
Bicycle		516					

MODULE L: DURABLE GOODS (CONTINUED)

ITEM	L01 Does your household own a [ITEM]? YES...1 NO...2 >> NEXT ITEM	L02 D G U O R O A D B L E ITEM CODE	L03	L04	L05	L06	L07
			How many [ITEM]s do you own?	What is the age of this [ITEM]? IF MORE THAN ONE ITEM, AVERAGE AGE.	If you wanted to sell one of this [ITEM] today, how much would you receive? IF MORE THAN ONE, AVERAGE VALUE.	Did you purchase any [ITEM] in the last 12 months?	How much in total did you pay for [ITEM] in the last 12 months?
			NUMBER	YEARS	MK		MK
Motorcycle/scooter		517					
Car		518					
Mini-bus		519					
Lorry		520					
Beer-brewing drum		521					
Upholstered chair, sofa set		522					
Coffee table (for sitting room)		523					
Cupboard, drawers, bureau		524					
Lantern (paraffin)		525					
Desk		526					
Clock		527					
Iron (for pressing clothes)		528					
Computer equipment & accessories		529					
Sattelite dish		530					
Solar panel		531					
Generator		532					
Electric Kettle		533					

ENUMERATOR:
RECORD
PRIMARY
RESPONDENT
ID FOR MODULE L:

--

ID

ENUMERATOR:
RECORD
END TIME
FOR MODULE L:

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HOURS MINUTES

MODULE M: FARM/FISHERY IMPLEMENTS, STRUCTURES AND MACHINERY (CONTINUED)

DATA ENTRY LINE NUMBER	ITEM	M09 How much did it cost to build [ITEM]?	M10 Did your household use the [ITEM] during the last 12 months? YES..1>> M12 NO...2	M11 What was the main reason for not using the [ITEM]? NO NEED FOR ONE.....1 NEEDS REPAIRS....2 LENT TO OTHERS.....3 RENTED TO OTHERS.....4 OTHER (SPECIFY)..5	M12 Did your household rent or borrow any [ITEM] during the last 12 months? YES..1 NO...2 >>NEXT ITEM	M13 How many [ITEM] did your household rent or borrow during the last 12 months?	M14 How much did your household pay to rent or borrow [ITEM] during the last 12 months? ESTIMATE THE VALUE OF IN-KIND PAYMENTS
1	IMPLEMENTS						
2	601	HAND HOE					
3	602	SLASHER					
4	603	AXE					
5	604	SPRAYER					
6	605	PANGA KNIFE					
7	606	SICKLE					
8	607	TREADLE PUMP					
9	608	WATERING CAN					
10	MACHINERY						
11	609	OX CART					
12	610	OX PLOUGH					
13	611	TRACTOR					
14	612	TRACTOR PLOUGH					
15	613	RIDGER					
16	614	CULTIVATOR					
17	615	GENERATOR					
18	616	MOTORISED PUMP					
19	617	GRAIN MILL					
20	618	OTHER (SPECIFY)					
21	STRUCTURES/BUILDINGS						
22	619	CHICKEN HOUSE					
23	620	LIVESTOCK KRAAL					
24	621	POULTRY KRAAL					
25	622	STORAGE HOUSE					
26	623	GRANARY					
27	624	BARN					
28	625	PIG STY					

ENUMERATOR:
RECORD
PRIMARY
RESPONDENT
ID FOR MODULE M:

ID

ENUMERATOR:
RECORD
END TIME
FOR MODULE M:

--	--

HOURS MINUTES

MODULE N: HOUSEHOLD ENTERPRISES
[ASK OF HOUSEHOLD HEAD]

ENUMERATOR: RECORD START DATE & TIME FOR MODULE N:

DAY	MONTH	HOURS	MINUTES

Over the past 12 months has anyone in your household...

N01 ... owned a non-agricultural business or provided a non-agricultural service from home or a household-owned shop, as a carwash owner, metal worker, mechanic, carpenter, tailor, barber, etc.?
 YES...1
 NO....2

N06 ... driven a household-owned taxi or pick-up truck to provide transportation or moving services?
 YES...1
 NO....2

N02 ... processed and sold any agricultural by-products, including flour, starch, juice, beer, jam, oil, seed, bran, etc., but excluding livestock by-products, fresh/processed fish?
 YES...1
 NO....2

N07 ... owned a bar or restaurant?
 YES...1
 NO....2

N03 ... owned a trading business on a street or in a market?
 YES...1
 NO....2

N08 ... owned any other non-agricultural business, even if it is a small business run from home or on a street?
 YES...1
 NO....2

N04 ... offered any service or sold anything on a street or in a market, including firewood, home-made charcoal, curios, construction timber, woodpoles, traditional medicine, mats, bricks, cane furniture, weave baskets, thatch grass etc.?
 YES...1
 NO....2

B. ENUMERATOR: IS THERE A "1" FOR ANY OF THE QUESTIONS N01 THROUGH N08?

N05 ... owned a professional office or offered professional services from home as a doctor, accountant, lawyer, translator, private tutor, midwife, mason, etc?
 YES...1
 NO....2

YES..1
 NO...2>>PAGE 51 TO
 RECORD PRIMARY
 RESPONDENT ID AND END
 TIME

PLEASE INCLUDE HOUSEHOLD BUSINESS VENTURES THAT HAVE BEEN SHUT DOWN PERMANENTLY OR TEMPORARILY DURING THE PAST 12 MONTHS.

MODULE N: HOUSEHOLD ENTERPRISES (CONTINUED)

E N T E R P R I S E I D	N23 ENUMERATOR: DOES THIS BUSINESS SELL FOREST-BASED PRODUCTS?	N24 What is the source of the forest-based product sold by this [ENTERPRISE]? READ RESPONSES Own land.....1 Forest/wild park reserve...2 Communal land...3 Purchased from someone else...4 Other (Specify).5	N25 During the past 12 months, was this [ENTERPRISE] operational in the month of [MONTH], and if so, were your sales high, average, or low? MARK FOR EACH MONTH IN TURN. START FROM THE MOST RECENT MONTH THAT WAS COMPLETED, GOING BACK MONTH BY MONTH. PLACE AN 'X' ABOVE THE CURRENT MONTH. MAKE SURE ALL APPLICABLE MONTHS IN THE PAST 12 MONTH PERIOD ARE MARKED WITH ONE OF THE CODES BELOW. IF THERE IS NO MONTH MARKED WITH "0" IN THE PAST 12 MONTHS, SKIP TO QUESTION N27. NONE:NOT IN OPERATION..0 LOW.....1 AVERAGE.....2 HIGH.....3 PLACE 'X' BELOW																N26 Why was this [ENTERPRISE] not in operation for [PERIOD INDICATED IN N25]? READ RESPONSES LIST UP TO 2 Lack of non-labour inputs..1 Lack of credit.....2 Lack of cash.....3 Seasonal work.....4 Bad weather.....5 Not profitable.....6 Own-Illness/Need to care for household members..7 Other (Specify)....8																																																																																																																																																																												
	YES..1 NO...2>>N25	<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th colspan="10">2018</th> <th colspan="10">2019</th> <th>1ST</th> <th>2ND</th> </tr> <tr> <th>APR</th><th>MAY</th><th>JUN</th><th>JUL</th><th>AUG</th><th>SEP</th><th>OCT</th><th>NOV</th><th>DEC</th><th></th> <th>JAN</th><th>FEB</th><th>MAR</th><th>APR</th><th>MAY</th><th>JUN</th><th>JUL</th><th>AUG</th><th>SEP</th><th>OCT</th> <th></th><th></th> </tr> </thead> <tbody> <tr><td>1</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>2</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>3</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>4</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>5</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table>																2018										2019										1ST	2ND	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC		JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT			1																										2																										3																										4																										5																									
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MODULE N: HOUSEHOLD ENTERPRISES (CONTINUED)

E N T E R P R I S E I D	N33 ENUMERATOR: REFER TO QUESTION 25. WAS THE LAST MONTH OF OPERATION A MONTH OF...	N34 During the last month of average sales , what was the value of total sales (zogulitsa) of products, goods or services of this [ENTERPRISE]?	N35 During the last month of high sales , what was the value of total sales (zogulitsa) of products, goods or services of this [ENTERPRISE]?	N36 During the last month of low sales , what was the value of total sales (zogulitsa) of products, goods or services of this [ENTERPRISE]?	N37 During the last month of high sales , what was the value of total sales (zogulitsa) of products, goods or services of this [ENTERPRISE]?	N38 During the last month of low sales , what was the value of total sales (zogulitsa) of products, goods or services of this [ENTERPRISE]?	N39 During the last month of average sales , what was the value of total sales (zogulitsa) of products, goods or services of this [ENTERPRISE]?	N40 During the last month of operation, what was the profit (phindu) of this [ENTERPRISE]?
	LOW SALES.....1 AVERAGE SALES...2 >> N36 HIGH SALES.....3 >> N38		>> N40		>> N40			
		AVG SALES MK	HIGH SALES MK	LOW SALES MK	HIGH SALES MK	LOW SALES MK	AVG SALES MK	PROFIT (MK) LAST MONTH OF OPERATION
1								
2								
3								
4								
5								

MODULE N: HOUSEHOLD ENTERPRISES (CONTINUED)

ENTERPRISE ID	N41 During the last month of operation, what was the total expenditure of this [ENTERPRISE] on... MAKE SURE THE RESPONDENT IS REFERRING TO THE LAST MONTH OF OPERATION AS STATED IN QUESTION N25. INCLUDE: ESTIMATED VALUE OF IN-KIND PAYMENTS. IF NOTHING WAS SPENT, RECORD ZERO.							
	a.	b.	c.	d.	e.	f.	g.	h.
	Raw Materials	Purchase of Goods for Sale (Inventory)	Freight / Transport	Fuel / Oil	Electricity	Water	Insurance	Other (Specify)
	MK	MK	MK	MK	MK	MK	MK	MK
	1							
	2							
3								
4								
5								

ENUMERATOR:
 RECORD
 PRIMARY
 RESPONDENT
 ID FOR MODULE N:

ID

ENUMERATOR:
 RECORD
 END TIME
 FOR MODULE N:

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HOURS MINUTES

MODULE P: OTHER INCOME (CONTINUED)

DATA ENTRY LINE NUMBER	CODE	SOURCE	P01 During the last 12 months, did you or any members of your household receive any [SOURCE]? YES . 1 NO . . 2 >> NEXT SOURCE	P02 How much [SOURCE] did your household receive in total during the last 12 months? ESTIMATE THE CASH VALUE OF IN-KIND TRANSFERS RECEIVED	P03 How much of the total [SOURCE] came from rural/urban/international locations?			P04 Who in your household kept/decided what to do with these earnings? LIST UP TO 2 FROM HOUSEHOLD ROSTER.	
					FROM RURAL AREAS	FROM URBAN AREAS	FROM OTHER COUNTRIES	HH ROSTER ID CODE # 1	HH ROSTER ID CODE # 2
				MK	MK	MK	MK		
11	RENTAL INCOME (CONTINUED):								
12	108	Income from Shop, Store Rental							
13	109	Income from Car, Truck, Other Vehicle Rental (DO NOT INCLUDE ANY NON-FARM ENTERPRISE INCOME)							
14	REVENUE FROM SALES OF ASSETS:								
15	110	Income from Real Estate Sales							
16	111	Income from Household Non-Agricultural Asset Sales							
17	112	Income from Household Agricultural/Fishing Asset Sales							
18	OTHER INCOME:								
19	113	Inheritance							
20	114	Lottery/Gambling Winnings							
21	115	Other Income (Specify):							

ENUMERATOR: RECORD
PRIMARY RESPONDENT
ID FOR MODULE P:

ENUMERATOR:
RECORD
END TIME
FOR MODULE P:

HOURS MINUTE

MODULE Q: GIFTS GIVEN OUT

ENUMERATOR: RECORD START DATE & TIME FOR MODULE Q:

DAY	MONTH	HOURS	MINUTES

DATA ENTRY LINE NUMBER	CODE	ITEM	Q01	Q02			Q02_1	Q02_2	Q02_3	Q03	
			During the last 12 months, did you or any members of your household give away any [ITEM] to individuals (friends/family) outside your household? YES..1 NO..2 >> NEXT ITEM	How much of the [ITEM] given away was destined to rural/urban/international locations?	To Rural Areas MK	To Urban Areas MK	To Other Countries MK	If cash was sent to another country, did any of it go through other means other than a bank? YES..1 NO..2>> Q03	In what currency was the cash? IF MORE THAN ONE MEANS, RECORD CURRENCY FOR THE MAIN CASH TRANSFER SENT USD...1 POUNDS..2 EUROS...3 SOUTH AFRICAN RANDS...4 OTHERS, SPECIFY..6	How much cash was sent through other means other than the bank during the last 12 months? RECORD THE AMOUNT SENT IN THE CURRENCY SPECIFIED IN Q02_2	Who in the household decided on the allocation of [ITEM] given away to individuals outside your household (friends/family) during the last 12 months? LIST UP TO 2 FROM HOUSEHOLD ROSTER.
1		Outgoing Transfers/Gifts									
2	201	Cash Transfers/Gifts [DO NOT INCLUDE GIFTS GIVEN FOR WEDDINGS, CEREMONIES OR FUNERALS. THESE EXPENDITURES ARE RECORDED IN MODULE K.]									
3	202	Food Transfers/Gifts [DO NOT INCLUDE GIFTS GIVEN FOR WEDDINGS, CEREMONIES OR FUNERALS. THESE EXPENDITURES ARE RECORDED IN MODULE K.]									
4	203	Non-Food In-Kind Transfers/Gifts [DO NOT INCLUDE GIFTS GIVEN FOR WEDDINGS, CEREMONIES OR FUNERALS. THESE EXPENDITURES ARE RECORDED IN MODULE K.]									

ENUMERATOR: RECORD PRIMARY RESPONDENT ID FOR MODULE Q:

ID

ENUMERATOR: RECORD END TIME FOR MODULE Q:

HOURS	MINUTES

MODULE R: SOCIAL SAFETY NETS
[ASK OF HOUSEHOLD HEAD]

ENUMERATOR: RECORD START DATE & TIME FOR MODULE R:

DAY	MONTH

HOURS	MINUTES

CODE	PROGRAM <i>DO NOT INCLUDE PENSIONS AND VOUCHERS FOR FERTILIZER AND SEED.</i>	R01 In the last 12 months, has any member of your household received cash, food, or other aid from [PROGRAMME]? YES...1 NO...2 >>NEXT ROW	R02 In the last 12 months, what was the total assistance received from [PROGRAMME]?			R03 Was the assistance given to... READ RESPONSES Entire HH...1 >> R05 Specific HH Members...2
			CASH	IN-KIND	MAIZE	
			MK	CASH VALUE - MK	KG	
101	Free Maize (Specify)		X	X		
102	Free Food (other than Maize) (Specify)		X	X		
1031	MASAF - Public Works Programme			X		
1032	Food/Cash-for-Work Programme (NON-MASAF - Public Works Programme [PWP])			X		
104	Inputs-For-Work Programme			X		
105	School Feeding Programme		X	X		
106	Free Distribution of Likuni Phala to Children and Mothers (Targeted Nutrition Programme [TNP])		X	X		
107	Supplementary Feeding for Malnourished Children at a Nutritional Rehabilitation Unit		X	X		
108	Scholarships/Bursaries for Secondary Education. (e.g., CRECCOM)			X		
1091	Scholarships for Tertiary Education (e.g. University Scholarship, Upgrading Teachers) Tertiary Loan Scheme (Government Loan for University and Other Tertiary Education)			X		
111	Direct Cash Transfers from Government (Mtukula Pakhoma) SPECIFY			X		
112	Direct Cash Transfers from others (Development Partners, NGOs). SPECIFY			X		
113	Other, Specify:			X		

MODULE R: SOCIAL SAFETY NETS (CONTINUED)

[ASK OF HOUSEHOLD HEAD]

CODE	PROGRAM <i>DO NOT INCLUDE PENSIONS AND VOUCHERS FOR FERTILIZER AND SEED.</i>	R04 Which household members received this assistance in the last 12 months? RECORD HOUSEHOLD ROSTER ID OF EACH MEMBER MENTIONED					R5 Who in your household controls/decides on the use of assistance from [PROGRAMME]? LIST UP TO 2 FROM HOUSEHOLD ROSTER		R6 In the last 12 months, for how many months did your household receive assistance from [PROGRAMME]?	R7 When was the last time your household received this assistance (THEN >> NEXT ROW)	
		ID CODE # 1	ID CODE # 2	ID CODE # 3	ID CODE # 4	ID CODE # 5	HH ROSTER ID CODE #1	HH ROSTER ID CODE #2	NUMBER OF MONTHS	MONTH	YEAR (4-DIGIT)
101	Free Maize										
102	Free Food (other than Maize)										
1031	MASAF - Public Works Programme										
1032	Food/Cash-for-Work Programme (NON-MASAF - Public Works Programme [PWP])										
104	Inputs-For-Work Programme										
105	School Feeding Programme										
106	Free Distribution of Likuni Phala to Children and Mothers (Targeted Nutrition Programme [TNP])										
107	Supplementary Feeding for Malnourished Children at a Nutritional Rehabilitation Unit										
108	Scholarships/Bursaries for Secondary Education. (e.g., CRECCOM)										
1091	Scholarships for Tertiary Education (e.g. University Scholarship, Upgrading Teachers) Tertiary Loan Scheme (Government Loan for University and Other Tertiary Education)										
111	Direct Cash Transfers from Government										
112	Direct Cash Transfers from others (Development Partners, NGOs). SPECIFY										
113	Other, Specify:										

ENUMERATOR:
RECORD
PRIMARY
RESPONDENT
ID FOR MODULE R:

ID

ENUMERATOR:
RECORD
END TIME
FOR MODULE R:

HOURS MINUTES

MODULE S: CREDIT (CONTINUED)

S12	S13		S14	S15	S16		S17	S18	S19	
During the last 12 months, did you or anyone else in your household try to borrow from someone outside the household or from an institution and were	Who turned you down? LIST UP TO 2.		What was main <u>reason</u> for trying to obtain the loan? Was it: [READ RESPONSES]	Are you awaiting word on a loan that you applied for during the last 12 months?	From whom or which institution are you awaiting word on a loan? LIST UP TO 2.		What was main <u>reason</u> for trying to obtain the loan? Was it: [READ RESPONSES]	ENUMERATOR: WAS THE ANSWER TO QUESTIONS S01, S12 AND S15 ALWAYS "NO"?	Why did you <u>not attempt to borrow</u> in the last 12 months? [LIST UP TO TWO ANSWERS IN ORDER OF IMPORTANCE.]	
YES..1 NO...2 >>S15	USE CODES BELOW.		PURCHASE LAND. .1 PURCHASE AGRI-CULTURAL INPUTS FOR FOOD CROP .2 PURCHASE INPUTS FOR TOBACCO . .3 PURCHASE INPUTS FOR OTHER CASH CROPS4 BUSINESS START-UP CAPITAL. . .5 PURCHASE NON-FARM INPUTS . .6 CONSUMPTION. . .7 OTHER (SPECIFY).8	YES..1 NO...2>>S18	USE CODES BELOW.		PURCHASE LAND. .1 PURCHASE AGRI-CULTURAL INPUTS FOR FOOD CROP .2 PURCHASE INPUTS FOR TOBACCO . .3 PURCHASE INPUTS FOR OTHER CASH CROPS4 BUSINESS START-UP CAPITAL. . .5 PURCHASE NON-FARM INPUTS . .6 CONSUMPTION. . .7 OTHER (SPECIFY).8	ANSWER TO ALL THREE QUESTIONS WAS ALWAYS "NO"..1 ANSWER TO ALL THREE QUESTIONS WAS NOT ALWAYS "NO"..2>>NEXT MODULE	NO NEED1 BELIEVED WOULD BE REFUSED.2 TOO EXPENSIVE3 TOO MUCH TROUBLE FOR WHAT IT IS WORTH .4 INADEQUATE COLLATERAL .5 DO NOT LIKE TO BE IN DEBT.6 DO NOT KNOW ANY LENDER.7 OTHER (SPECIFY)8 (THEN >> NEXT MODULE)	
	1ST	2ND			1ST	2ND			1ST	2ND

CODES FOR S4, S13 & S16:

- RELATIVE1
- NEIGHBOUR.2
- GROCERY/LOCAL MERCHANT3
- MONEY LENDER (KATAPILA)4
- EMPLOYER5
- RELIGIOUS INSTITUTION6
- MARDEF7
- MRFC8
- SACCO.9
- BANK (COMMERCIAL) .10
- NGO.11
- OTHER (SPECIFY) . .12
- VILLAGE BANK.....13

ENUMERATOR: RECORD PRIMARY RESPONDENT ID FOR MODULE S:

ID

ENUMERATOR: RECORD END TIME FOR MODULE S:

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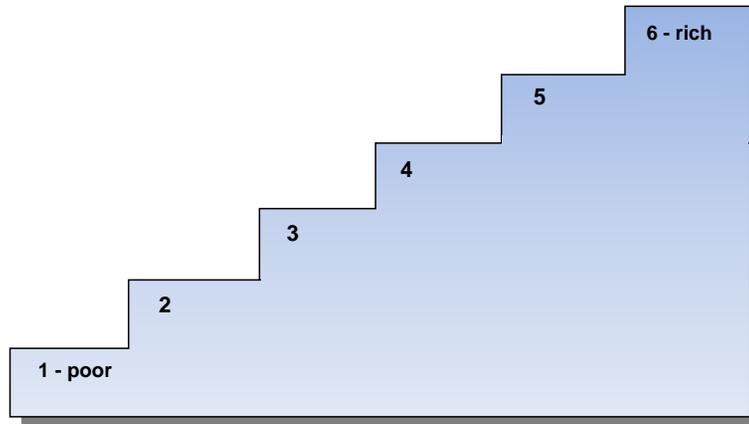
HOURS MINUTES

MODULE T: SUBJECTIVE ASSESSMENT OF WELL-BEING

ENUMERATOR: RECORD START DATE & TIME FOR MODULE T:

DAY	MONTH	HOURS	MINUTES

T01	T02	T03	T04	T05	T06	T07	T08	T09	T10	T11	T12
Concerning your household's <u>food consumption</u> over the past <u>one month</u> , which of the following is true?	Concerning your <u>housing</u> , which of the following is true?	Concerning your household's <u>clothing</u> , which of the following is true?	Concerning the standard of <u>health care</u> you receive for household members, which of the following is true?	Imagine six steps, where on the bottom, the first step, stand the poorest people, and on the highest step, the sixth, stand the rich. SHOW THE PICTURE OF THE STEPS BELOW.			Which of the following is true? Your current income ... [READ]: ALLOWS YOU TO BUILD YOUR SAVINGS.....1 ALLOWS YOU TO SAVE JUST A LITTLE.....2 ONLY JUST MEETS YOUR EXPENSES.....3 IS NOT SUFFICIENT, SO YOU NEED TO USE YOUR SAVINGS TO MEET EXPENSES.....4 IS REALLY NOT SUFFICIENT, SO YOU NEED TO BORROW TO MEET EXPENSES.....5	How many <u>changes of clothes</u> do you (HH HEAD) own? (NUMBER OF TROUSERS FOR MEN; SKIRTS/ DRESSES FOR WOMEN)	What do you (HH HEAD) <u>sleep on</u> ?	What do you (HH HEAD) <u>sleep under in the cold season</u> (July)?	What do you (HH HEAD) <u>sleep under in the hot season</u> (October)?
It was less than adequate for household needs. 1 It was just adequate for household needs... 2 It was more than adequate for household needs. 3 (NOTE THAT 'ADEQUATE' MEANS NO MORE OR NO LESS THAN WHAT THE RESPONDENT CONSIDERS TO BE THE MINIMUM CONSUMPTION NEEDS OF THE HOUSEHOLD.)					On which step are most of your neighbors today?	On which step are most of your friends today?			BED & MATTRESS . . 1 BED & MAT (GRASS). 2 BED ALONE. 3 MATTRESS ON FLOOR. 4 MAT (GRASS) ON FLOOR 5 CLOTH/SACK ON FLOOR 6 FLOOR (NOTHING ELSE) 7 OTHER (SPECIFY) . . 8	BLANKET & SHEETS. . . 1 BLANKET ONLY. 2 SHEETS ONLY 3 CHITENJE CLOTH. . . . 4 FERTILIZER or GRAIN SACK 5 CLOTHES 6 NOTHING 7 OTHER (SPECIFY) . . . 8	
								NUMBER			



MODULE T: SUBJECTIVE ASSESSMENT OF WELL-BEING (CONTINUED)

T13	T14	T15	T16	T17	T18	T19	T20
During the last 12 months, was there a time when you or others in your household worried about not having enough food to eat because of a lack of money or other resources?	During the last 12 months, was there a time when you or others in your household were unable to eat healthy and nutritious food because of a lack of money or other resources?	During the last 12 months, was there a time when you or others in your household ate only a few kinds of foods because of a lack of money or other resources?	During the last 12 months, was there a time when you or others in your household had to skip a meal because there was not enough money or other resources to get food?	During the last 12 months, was there a time when you or others in your household ate less than you thought you should because of a lack of money or other resources?	During the last 12 months, was there a time when your household ran out of food because of a lack of money or other resources?	During the last 12 months, was there a time when you or others in your household were hungry but did not eat because there was not enough money or other resources for food?	During the last 12 months, was there a time when you or others in your household went without eating for a whole day because of a lack of money or other resources?
NO.....1 YES.....2 DON'T KNOW..3 REFUSED.....4	NO.....1 YES.....2 DON'T KNOW..3 REFUSED.....4	NO.....1 YES.....2 DON'T KNOW..3 REFUSED.....4	NO.....1 YES.....2 DON'T KNOW..3 REFUSED.....4	NO.....1 YES.....2 DON'T KNOW..3 REFUSED.....4	NO.....1 YES.....2 DON'T KNOW..3 REFUSED.....4	NO.....1 YES.....2 DON'T KNOW..3 REFUSED.....4	NO.....1 YES.....2 DON'T KNOW..3 REFUSED.....4

ENUMERATOR: RECORD
PRIMARY RESPONDENT
ID FOR MODULE T:

ID

ENUMERATOR:
RECORD
END TIME
FOR MODULE T:

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

MODULE V: CHILD ANTHROPOMETRY ENUMERATOR: RECORD START DATE & TIME FOR MODULE V:

DAY	MONTH	HOURS	MINUTES
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V01	V02	V03	V04	V05	V06	V07	V08	V09	V10	V11	V12	V13	V14	V15	V16
I D C O D E	<p>CROSS-SECTIONAL: PUT AN 'X' FOR ALL INDIVIDUALS WHO ARE OLDER THAN EXACTLY FIVE YEARS OLD (60 MONTHS).</p> <p>PANEL: PUT AN 'X' FOR ALL NEW INDIVIDUALS WHO ARE OLDER THAN EXACTLY FIVE YEARS OLD. FOR IHPS HOUSEHOLD MEMBERS PUT AN 'X' FOR ALL MEMBERS WHO ARE OLDER THAN 15 YEARS OF AGE.</p> <p>DO NOT ADMINISTER THIS MODULE TO THESE INDIVIDUALS OUTSIDE OF THE SPECIFIED AGE RANGES.</p> <p>IF NONE WITHIN THE SPECIFIED AGE RANGES FOR EACH HOUSEHOLD AND INDIVIDUAL TYPE, >>NEXT MODULE.</p>	<p>RECORD THE ID OF THE MOTHER / GUARDIAN OF THE CHILD IN THE HOUSEHOLD</p>	<p>How old is [NAME]?</p> <p>RECONFIRM EXACT AGE - MUST INCLUDE BOTH YEARS AND MONTHS.</p>	<p>WAS [NAME] MEASURED?</p>	<p>WHY NOT?</p>	<p>IS THE ANSWER TO V05 "NO"?</p>	<p>WEIGHT OF CHILD</p>	<p>HEIGHT / LENGTH OF CHILD</p>	<p>HEIGHT / LENGTH MEASURED WITH CHILD STANDING OR LYING DOWN?</p>	<p>WAS THE MEASUREMENT OF THE CHILD DONE IN A NORMAL MANNER, OR WAS MEASUREMENT DIFFICULT?</p>	<p>ASK OF MOTHER / GUARDIAN: Does the child participate in a <u>nutrition programme</u>?</p>	<p>ASK OF MOTHER / GUARDIAN: Does the child participate in an <u>under-five clinic</u>?</p>	<p>DID CHILD APPEAR TO HAVE OEDEMA (SWELLING THAT IS NOT NORMAL)?</p>	<p>IS THIS CHILD 9 MONTHS OR OLDER?</p>	<p>ASK OF MOTHER / GUARDIAN: Was the child given measles vaccination injections or MMR, a shot in the arm at the age of 9 months or older?</p>
1															
2															
3															
4															
5															
6															
7															
8															
9															
10															
11															
12															

ENUMERATOR: RECORD PRIMARY RESPONDENT ID FOR MODULE V:

ID

ENUMERATOR: RECORD END TIME FOR MODULE V:

HOURS	MINUTES
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MODULE W: DEATHS IN HOUSEHOLD

W01. Over the past two years, did any member of your household die, including any infants?

YES..1
NO...2>>NEXT
MODULE

ENUMERATOR: RECORD START DATE & TIME FOR MODULE W:

DAYS	MONTHS	HOURS	MINUTES

W02 S E R I A L N O	W03 NAME OF DECEASED	W04 DECEASED'S RELATION- SHIP TO HEAD OF HOUSEHOLD	W05 SEX	W06 AGE AT DEATH		W07 ACCORDING TO W06, WAS THE DECEASED UNDER 12 YEARS OLD WHEN HE/ SHE DIED?	W08 What kind of work did [NAME] do for most of his/her life?	W09 Did [NAME] die of old age, an illness, or of some other cause?	W10 What was the [NON-ILLNESS] cause of [NAME]'s death?	W11 What was the illness that caused [NAME]'s death? CAN NOTE UP TO TWO.	W12 For how long was [NAME] suffering from this illness before he/she died?		W13 Was this cause of death diagnosed, or is this only your own percep-tion?	W14 After this person died, did you or members of your house- hold lose any land or other assets due to inheritance traditions?	W15 What was the value of the land or assets lost?
				IF UNDER 5 YEARS, INCLUDE MONTHS	YES 1>>W09 NO...2						CODES BELOW	MALE..1 FEMALE.2			
31							FARMING 1 FISHING 2 TRADER/MERCHANT . 3 TRANSPORT 4 TRADESMAN (MASON, CARPENTER, ETC). 5 CIVIL SERVANT . . 6 TEACHER 7 DOCTOR/NURSE/ETC. 8 OTHER PROFESSION. 9 CLERK/SECRETARY .10 FACTORY WORKER. .11 RESTAURANT, BAR .12 GENERAL LABOURER.13 HOME WORKER . . .14 STUDENT15 MILITARY16 OTHER17	OLD AGE .1 (>W14) ILLNESS .2 (>W11) OTHER CAUSE. .3	TRAFFIC ACCIDENT 1 OTHER ACCIDENT OR INJURY. . . . 2 CHILDBIRTH OR COMPLICATIONS.3 MURDER.4 SUICIDE5 WITCHCRAFT/ SORCERY6 OTHER (SPEC.) . 7	CODES BELOW 1ST ILLNESS 2ND ILLNESS	DAY .3 WEEK.4 MONTH 5 YEAR.6	OWN PERCEPTION 3	YES..1 NO...2 (>NEXT DECEASED)	MK	
32															
33															
34															
35															
36															

RELATIONSHIP CODES

- WIFE/HUSBAND.2
- CHILD/ADOPTED CHILD . .3
- GRANDCHILD.4
- NIECE/NEPHEW.5
- FATHER/MOTHER6
- SISTER/BROTHER.7
- SON/DAUGHTER-IN-LAW . .8
- BROTHER/SISTER-IN-LAW .9

- GRANDFATHER/MOTHER. .10
- FATHER/MOTHER-IN-LAW.11
- OTHER RELATIVE. . . .12
- SERVANT OR SERVANT'S
RELATIVE13
- TENANT OR TENANT'S
RELATIVE14

ILLNESS CODES

- MALARIA1
- MEASLES2
- DIARRHEA.3
- PNEUMONIA4
- MENINGITIS.5
- MALNUTRITION. .6
- TUBERCULOSIS. .7

- HIV/AIDS.8
- HEART DISEASE9
- HIGH BLOOD PRESSURE OR CIRCULATORY
PROBLEM.10
- STROKE.11
- CANCER.12
- KIDNEY DISEASE.13

- LIVER DISEASE.14
- SEXUALLY TRANSMITTED
DISEASE.15
- DIABETES COMPLICATION. .16
- DOES NOT KNOW17
- REFUSED TO ANSWER . .18
- OTHER (SPECIFY)19

ENUMERATOR: RECORD
PRIMARY RESPONDENT
ID FOR MODULE W:

ID

ENUMERATOR:
RECORD
END TIME
FOR MODULE W:

HOURS	MINUTES

HOURS MINUTES

MODULE X: FILTER QUESTIONS FOR AGRICULTURE & FISHERY QUESTIONNAIRES

ENUMERATOR: RECORD START DATE & TIME FOR MODULE X:

DAY	MONTH	HOURS	MINUTES

X01. ENUMERATOR: IS THIS A PANEL HOUSEHOLD? YES..1>>>X10
NO . . 2

CROSS-SECTION

PANEL VISIT 1

PANEL VISIT 2

X02. ENUMERATOR: WHAT WAS THE LAST COMPLETED RAINY SEASON? 2017/18..1
2018/19..2

X10. Did you or anyone in your household own or cultivate a plot during the 2018/2019 rainy season? YES..1
NO...2

X13. ENUMERATOR: DID HOUSEHOLD SAY 'YES' TO X10? YES..1
NO...2

X03. Did you or anyone in your household own or cultivate a plot during the [LAST COMPLETED RAINY SEASON - IN X02]? YES..1
NO...2

X11. Did you or anyone in your household own any livestock in the last 12 months? YES..1
NO...2

X14. Did you or anyone in your household cultivate a plot during the 2019 dry (dimba) season? YES..1
NO...2

X04. ENUMERATOR: WHAT WAS THE LAST COMPLETED DRY (DIMBA) SEASON? 2018..1
2019..2

X11_1. ENUMERATOR: SHOULD THE AGRICULTURE QUESTIONNAIRE BE ADMINISTERED? MARK 'YES' IF RESPONDENT SAID 'YES' TO X10 OR X11. YES..1
NO...2

X15. Did you or anyone in your household harvest any cassava, tea, coffee or any other fruits in the last 12 months? YES..1
NO...2

X05. Did you or anyone in your household own or cultivate any plot during the [LAST COMPLETED DRY (DIMBA) SEASON - IN X04]? YES..1
NO...2

X12_1. ENUMERATOR: IS THIS A PANEL A HOUSEHOLD? YES..1
NO...2>>>
END OF HOUSEHOLD QUESTIONNAIRE

X16. ENUMERATOR: SHOULD THE VISIT 2 AGRICULTURE QUESTIONNAIRE BE ADMINISTERED? MARK 'YES' IF RESPONDENT SAID 'YES' TO ONE OF X13, X14 or X15. YES..1
NO...2

X06. Did you or anyone in your household produce any cassava, tea, coffee or any other fruits in the last 12 months? YES..1
NO...2

X17. ENUMERATOR: IS THIS A PANEL B HOUSEHOLD? YES..1
NO...2

X07. Did you or anyone in your household own any livestock in the last 12 months? YES..1
NO...2

X08. ENUMERATOR: SHOULD THE AGRICULTURE QUESTIONNAIRE BE ADMINISTERED? YES..1
NO...2

X18. ENUMERATOR: SHOULD THE FISHERY QUESTIONNAIRE BE ADMINISTERED? MARK 'YES' IF RESPONDENT SAID 'YES' TO X22. YES..1
NO...2

X09. Did you or anyone in this household do any fishing, fish processing or fish trading in the last 12 months? YES..1
NO...2

IF YES, FISHERY QUESTIONNAIRE HAS TO BE ADMINISTERED.

ENUMERATOR: RECORD PRIMARY RESPONDENT ID FOR MODULE X: ID

ENUMERATOR: RECORD END TIME FOR MODULE X: HOURS MINUTES

END OF QUESTIONS

SURVEY HOUSEHOLD MEMBER LIST

I D C O D E	B01	B02	B03	B05	
		NAMES OF HOUSEHOLD MEMBERS ONLY LIST HOUSEHOLD MEMBERS, NO OTHERS.	SEX	How old is [NAME]?	
			MALE...1 FEMALE..2	YEARS	MONTHS
	1				
	2				
	3				
	4				
	5				
	6				
	7				
	8				
	9				
	10				
	11				
	12				
	13				
	14				
	15				

E07_1 CROP CODES	
MAIZE	COTTON.....37
LOCAL.....1	SUNFLOWER.....38
COMPOSITE/OPV.....2	SUGAR CANE.....39
HYBRID.....3	CABBAGE.....40
HYBRID RECYCLED...4	TANAPOSI.....41
TOBACCO	NKHWANI.....42
BURLEY.....5	THEREERE/OKRA.....43
FLUE CURED.....6	TOMATO.....44
NNDF.....7	ONION.....45
SDF.....8	PEA.....46
ORIENTAL.....9	PAPRIKA.....47
OTHER TOBACCO (SPECIFY).....10	OTHER RAINY/DRY SEASON CROPS (SPECIFY).....48
GROUNDNUT	CASSAVA.....49
CHALIMBANA.....11	TEA.....50
CG7.....12	COFFEE.....51
MANI-PINTAR.....13	MANGO.....52
MAWANGA.....14	ORANGE.....53
JL24.....15	PAWPAW/PAPAYA.....54
OTHER GROUNDNUT (SPECIFY).....16	BANANA.....55
RICE	AVOCADO.....56
LOCAL.....17	GUAVA.....57
FAYA.....18	LEMON.....58
PUSA.....19	NAARTJE (TANGERINE).....59
TCG10.....20	PEACH.....60
IET4094 (SENGA)..21	[CUSTADE APPLE] POZA....61
WAMBONE.....22	MEXICAN APPLE [MASUKU]..62
KILOMBERO.....23	MASAU.....63
ITA.....24	PINEAPPLE.....64
MTUPATUPA.....25	MACADAMIA.....65
OTHER RICE (SPECIFY).....26	FODDER TREES.....66
GROUND BEAN (NZAMA).....27	FERTILISER TREES.....67
SWEET POTATO.....28	FUEL WOOD TREES.....68
IRISH [MALAWI] POTATO..29	OTHER TREE/ PERMANENT CROPS (SPECIFY).....69
WHEAT.....30	
FINGER MILLET (MAWERE)..31	
SORGHUM.....32	
PEARL MILLET (MCHEWERE).33	
BEANS.....34	
SOYABEAN.....35	
PIGEONPEA (NANDOLO)....36	