

CONFIDENTIAL

All information collected in this survey is strictly confidential and will be used for statistical purposes only

Royal Government of Cambodia
Ministry of Planning
National Institute of Statistics

Household ID

CAMBODIA SOCIO-ECONOMIC SURVEY 2012
HOUSEHOLD QUESTIONNAIRE

A. To be completed by interviewer before interview												
Province /Capital												
District/City/Khan												
Commune/Sangkat												
Sample Village/Mondol												
Zone												
Sector (Urban=1, Rural=2)												
Sample reference number of household												
B. To be completed by interviewer												
Name of household head					Phone:							
Address (house No., street....) of other identification												
Date of first visit to Household					Day:			Month:			Year:	
Date of last visit					Day:			Month:			Year:	
Team Number							Interviewer's Id:					
Interviewer's name:					Interviewer's signature:							
Interviewer's phone no:												
Month and Year of Survey					Month			Year:				
To be completed after filling-out the list of household members					Male:			Female:			Total members:	
C. To be completed by supervisor after checking completed questionnaire and diary thoroughly												
Supervisor's name:										Id:		
Date checked by supervisor				Completed Put X	Not completed Put X			Day	Month	Year		
Date checked week 1												
Date checked week 2 (large sample year)												
Diary checked (large sample year)												
Household refused from the beginning of the interview week(s)/ not in village during the interview week(s)												
Supervisor's signature:							Supervisor's phone no:					
Reception				Preparation				Data Entry				
Id:		Date:		Id:		Date:		Id:		Date:		

01. INITIAL VISIT

Respondent: head of household, spouse of the head of household, or another adult household member

INITIAL VISIT

A. LIST OF HOUSEHOLD MEMBERS

The questions should be asked of the head of household, spouse of the head of household or other adult household member if both head and spouse are absent.

Please provide the following information on all members usually residing in this household.

ID NUMBER	Please give me the names of all household members, starting with head of the household. A person is counted as a household member if he/she lives here or has been absent for less than 12 months.	Sex 1 = Male 2 = Female	What is..[NAME]..s date of birth? Write ' - ' if don't know, for day or month or year			What is.. [NAME] ...s age in completed years? Write '0' if less than one year of age, and " - " if don't know	Relationship to the head 01 = Head 02 = Spouse 03 = Son/Daughter 04 = Stepchild 05 = Adopted child/ Foster child 06 = Parent 07 = Sibling 08 = Grand child 09 = Nephew/Niece 10 = Son/Daughter-in-law 11 = Brother/Sister-in-law 12 = Parent-in-law 13 = Other relatives 14 = Servant 15 = Other non-relative including boarder Great/grand child should be reported in other relatives	Does the father of ..[NAME].. live in the household? If YES, write the ID CODE, if NO write " - "
			DAY	MONTH	YEAR	YEARS		
(1)	(2)	(3)	(4a)	(4b)	(4c)	(5)	(6)	(7)
01								
02								
03								
04								
05								
06								
07								
08								
09								
10								
11								
12								
13								
14								
15								

Respondent: head of household, spouse of the head of household or another adult household member

INITIAL VISIT

01. A. LIST OF HOUSEHOLD MEMBERS (CONTINUED)

ID NUMBER	Does the mother of ..[NAME].. live in the household? If YES, write the ID CODE, if NO write " - "	Only for members aged 13 and above:		Is ..[NAME]..Khmer or other ethnic group? 1 = Khmer (>> 12) 2 = Cham 3 = Other local ethnic group 4 = Chinese 5 = Vietnamese 6 = Thai 7 = Lao 8 = Other (Specify)	Does ..[NAME].. speak Khmer? 1=Yes 2=No	Can ..[NAME].speak other languages than Khmer? 0=No 1= French 2= English 3= Chinese 4= Vietnamese 5= Thai 6= Lao 7= Chaam 8= Other local language 9= Other (Specify)			Has ..[NAME].. been present all days last week? 1=Yes >> NEXT PERSON 2=No	How many weeks has ..[NAME].. been absent from home during the past 12 months? WRITE '0' IF LESS THAN ONE WEEK >> NEXT PERSON
		What is ..[NAME].. 's marital status? 1 = Married/Living together 2 = Divorced/Separated (>> 11) 3 = Widowed (>> 11) 4 = Never married/Never lived with a partner (>> 11)	Does the spouse of ..[NAME].. live in this household? If YES, write the ID CODE, if NO write " - "			1	2	3		
(1)	(8)	(9)	(10)	(11a)	(11b)	(12a)	(12b)	(12c)	(13)	(14)
01										
02										
03										
04										
05										
06										
07										
08										
09										
10										
11										
12										
13										
14										
15										

01. B. FOOD, BEVERAGES AND TOBACCO CONSUMPTION DURING THE LAST 7 DAYS

Respondent: The household member who knows most about food, beverage, tobacco consumption in the last 7 days

INITIAL VISIT

Q1 Did your household have any economic activity, e.g. agriculture production (farming), producing goods, service etc. during the last 7 days?

1 = Yes

2 = No

Only expenditure/value of own production for household consumption!

Note that any household's expenditure on economic activity shall not be included in this section, because it will be asked in the sections on the economic activities (Section 5B-H).

ITEM NUMBER	For each item group try to estimate quantity of items consumed and then how much of the consumed quantity had been purchased in cash and how much was from own production or received as payment in kind for work, or as gift, or free collection.	Value of consumption in Riels Write '0' if nothing		
		Purchased in cash	Own production, wages in kind, gifts, free collections (imputed value)	Total consumption (Col 3 + Col 4)
	FOOD/BEVERAGE/TOBACCO ITEMS	RIELS	RIELS	RIELS
(1)	(2)	(3)	(4)	(5)
01	Rice (All kind of rice to be included)			
02	Other cereals (bread, corn, wheat flour, rice flour, corn meal, rice cakes, noodles, biscuits, etc.)			
03	Fish (fresh fish, salted and dried fish, canned fish, shrimp, prawn, crab, etc.)			
04	Meat & poultry (beef, buffalo, mutton, lamb, pork, chicken, duck, innards, inch liver, spleen, dried beef)			
05	Eggs (chicken egg, duck egg, quail egg, fermented/salted egg, etc.)			
06	Dairy products (fresh milk, condensed or powdered milk, ice cream, cheese, other dairy products, etc.)			
07	Oil and fats (rice bran oil, vegetable oil, pork fat, butter, margarine, coconut/frying oil, etc.)			
08	Fresh vegetables (trakun, onion, shallot, cabbage, spinach, carrot, beans, chilli, tomato, etc.)			
09	Tuber (cassava, sweet potato, potato, traov, sugar beet, etc.)			
10	Pulses and legumes (green gram, dhall, cowpea, bean sprout, other seeds, etc.)			
11	Prepared and preserved vegetables (cucumber pickles, other pickles, tomato paste, etc.)			
12	Fruit (banana, orange, mango, pineapple, lemon, papaya, durian, water melon, grape, apple, canned and dried fruits, etc.)			
13	Dried nuts and edible seeds (coconut, cashew nut, lotus nut, peanut, gourd seed, other nuts)			
14	Sugar, salt and spices (sugar, jaggery, salt, chocolate, candy, coriander, red pepper spice, garlic, ginger, soy sauce, fish sauce, monosodium glutamate, etc.)			
15	Tea, coffee, cocoa			
16	Non-alcoholic beverages (canned or bottled soft drinks, mineral water, fruit juice, fruit syrup, etc.)			
17	Alcoholic beverages (beer, wine, whisky, scotch, other distilled spirits)			
18	Tobacco products (cigarettes, mild tobacco, strong tobacco, etc.)			
19	Other food products (fried insects, peanut preparation, flavoured ice, ice, other food products)			
20	Food taken away from home (meals at work, school, restaurants, snacks, coffee, soft drinks purchased outside home)			
21	Prepared meals bought outside and eaten at home			
22	Total 1 - 21:			

01. C. RECALL NON-FOOD EXPENDITURES

Respondent: The household member who knows most about the non-food expenditure in the household

INITIAL VISIT

Only expenditure for household consumption

No.	What was your household's expenditure on the following items during the indicated time periods?	Time period	Value (in Riels) Write '0' if nothing		
			In-cash expenditure	In-kind expenditure or gifts given away	Total expenditure (Col 4 + Col 5)
(1)	NON-FOOD ITEMS (2)	(3)	(4)	(5)	(6)
01	Medical care (doctors' fees, other medical services, drugs, hospital charges, other medical supplies, etc.)	Last 1 month			
02	Transportation (personal transport equipment, operation of transport equipment, maintenance and repair of equipment, gasoline and diesel for own transportation, fees for public transport, moving fee, driving lessons, etc.)	Last 1 month			
03	Communication (postage stamps, fax, telephone and internet phone charges, cell phones, phone cards, internet charges etc.)	Last 1 month			
04	Personal care (soap, toothpaste, razor, sanitary napkins, haircut, manicure, etc.)	Last 1 month			
05	Clothing and footwear (tailored clothes, ready-made clothes, rain clothes, underwear, baby clothes, diapers, hats, shoes, boots, etc.)	Last 6 months			
06	Furniture, furnishings and household equipment and operation (curtain, household appliances, cooking utensils, light bulbs, soap and detergents etc.)	Last 12 months			
07	Domestic salaries (servant's salary, hired labour for cleaning, laundry, cooking etc.)	Last 12 months			
08	Recreation within Cambodia (entertainment services, recreational goods and supplies, tourist travel, hotel accommodation)	Last 12 months			
09	Recreation abroad (entertainment services, recreational goods and supplies, tourist travel, hotel accommodation)	Last 12 months			
10	Education (school fees, textbooks, private tutoring charges, etc.)	Last 12 months			
11	Personal effects (costume/gold jewellery, handbags, wallets, wristwatch, clocks, umbrella)	Last 12 months			
12	Gambling (lottery, sports and animal betting: casino gambling, card games, football, boxing, cockfighting etc.)	Last 12 months			
13	Miscellaneous items (special occasions as funeral rituals, weddings, parties, , cash gifts, charity, etc.)	Last 12 months			
14	Regular cash transfers to charities (exclude "non-regular" transfers to charities, which should be reported in item 15)	Last 12 months			
15	Regular inter-households transfers (regular cash and in kind support to people living in other households)	Last 12 months			
16	Taxes on income (tax on salary)	Last 12 months			
17	Taxes on property (e.g houses, cars)	Last 12 months			
18	Total 1-17:				

01. D. VULNERABILITY

Respondent: Head of household, spouse of the head of household or another adult household member

INITIAL VISIT

<p>Q1 Did your family use iodized salt, yesterday? Ask the respondent for a teaspoon full of cooking salt and test for iodine.</p>	<p>1 = Iodine present 2 = No iodine 3 = No salt in the household 4 = Salt not tested</p>	<input type="text"/>																								
<p>Q2 In the last 12 months, has this household had enough food all days or were there days and weeks with very little or no food so that the household had to starve ("was hungry")?</p>	<p>1 = Enough food all the last 12 months (>> NEXT SECTION) 2 = Not enough food</p>	<input type="text"/>																								
<p>Q3 How many of the last 52 weeks did the household have so little food that it was starving ("was hungry")?</p>	<p>Number of WEEKS:</p>	<input type="text"/>																								
<p>Write '0' if less than 1 week</p>																										
<p>Q4 Which months of the last 12 months did the household starve ("was hungry")? (1 = January, 2 = February, 3 = March...) Code "1" if starving and "0" otherwise</p>	<p>Month</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td> </tr> <tr> <td style="height: 20px;"></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>	1	2	3	4	5	6	7	8	9	10	11	12													
1	2	3	4	5	6	7	8	9	10	11	12															
<p>Q5 Does the household have an IDPoor Card or other Social Equity Card?</p>	<p>01 = IDPoor Card 02 = Other Social Equity card 03 = No card for assistance</p>	<input type="text"/>																								

Note: With starvation means "being hungry" involuntarily.

Note: If one household member is starving than the household is considered to be starving.

END OF INITIAL VISIT

02. EDUCATION AND LITERACY

Respondent: All household members aged 3 years and older. For children 3-6 years ask their parents.

Please provide information on all members aged 3 years and older who usually reside in this household. If absent person, proxy interview is allowed.

ID NUMBER	ID NUMBER OF RESPONDENT	Can ..[NAME]... read a simple message in any language?	Can ..[NAME]... write a simple message in any language?	Has ..[NAME]... ever attended school?	How many years has ...[NAME]... attended school?	What is the highest level ..[NAME].. has completed?	Is ..[NAME].. currently in the school system?	What's the level..[NAME]'s.. is currently attending?	Is the school public or private?
		1 = Yes 2 = No	1 = Yes 2 = No	1 = Yes 2 = No (> 11)	Enter completed number of years	98 = Don't know 88 = No class completed 00 = Pre-school/Kindergarten 01 = Class one completed 02 = Class two completed... 09 = Class nine completed without certificate ... 11 = Class eleven completed 12 = Class twelve completed without certificate 13 = Lower education certificate (diploma) 14 = Higher education certificate (BacII) 15 = Technical/vocational pre-secondary diploma/certificate 16 = Technical/vocational post-secondary diploma/certificate 17 = College/university undergraduate but no degree 18 = Bachelor degree (B.A., BSc, etc.) 19 = Masters degree (M.A., MSc, etc) 20 = Doctorate degree (PhD) 21 = Other (Specify)	1 = Yes 2 = No (>11) If the child is on holidays, he/she is considered in the school system	00 = Pre-school/ Kindergarten 01 = Class one 02 = Class two..., 11 = Class eleven 12 = Class twelve 15 = Technical/vocational pre-secondary diploma/ certificate 16 = Technical/vocational post-secondary diploma/certificate 17 = College/university undergraduate studies 21 = Postgraduate studies	1 = Public 2 = Private
(1)	(1b)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
01									
02									
03									
04									
05									
06									
07									
08									
09									
10									
11									
12									
13									
14									
15									

Note: If he/she pass national exam in class nine or twelve put code 13 or 14 respectively

Note: To continue to class 10 the student must have completed class 9 with diploma (code 13)

Note: Collage/university undergraduate. A student may have completed one or more term/year exam but do not yet accomplished a degree. Then note down code "17".

02. EDUCATION AND LITERACY (CONTINUED)

Respondent: All household members aged 3 years and older. For children 3-6 years ask their parents.

Please provide information on all members aged 3 years and older who usually reside in this household. If absent person, proxy interview is allowed.

ID NUMBER	Is ..[NAME].. currently taking private lessons after school? (languages, math, science, music, sports)? 1=Yes 2=No >>12	If Col. 4 = 2 or Col.7 = 2 and below 18 years of age Why is ..[NAME].. not attending (has never attended) school? 01 = Don't want to 02 = Did not do well in school 03 = No suitable school available/school is too far 04 = No teacher/Supplies 05 = High cost of schooling 06 = Must contribute to household income 07 = Must help with household chores 08 = Too poor 09 = Due to disability 10 = Due to long term illness (over 3 months) 11 = Too young 12 = Other (specify)	Has ..[NAME].. ever attended non-formal class? 1 = Yes 2 = No (>> 15)	Is ..[NAME].. currently attending non-formal classes? 1 = Yes 2 = No (if Col.12 = 1 >> 14 else >> 15)	What kind of non-formal class is ..[NAME].. currently attending/did ..[NAME].. attend? 1 = Literacy programmes (6 months) 2 = Vocational training (Tailoring, motor repairing, Khmer classical music training, hairdressing, pottery...etc. 3 = Post literacy programmes (Agricultural training includes such as planting vegetable, mushrooms, raising fish, animal.. 4 = Foreign Languages 5 = Computer literacy 6 = Others (Specify)	Did ..[NAME].. attend school past school year (including non-formal class)? 1 = Yes (>> 16a) 2 = No >> NEXT PERSON)
(1)	(10)	(11)	(12)	(13)	(14)	(15)
01						
02						
03						
04						
05						
06						
07						
08						
09						
10						
11						
12						
13						
14						
15						

02. EDUCATION AND LITERACY (CONTINUED)

Respondent: All household members aged 3 years and older. For children 3-6 years ask their parents.

Please provide information on all members aged 3 years and older who usually reside in this household. If absent person, proxy interview is allowed.

ID NUMBER	<p>If code 1 in col. 15, please fill up columns 16a-16h, otherwise, leave it blank and continue with next person.</p> <p>What were the educational expenses for ..[NAME]..during the past school year including the expense on non-formal education and private lesson?</p> <p style="text-align: center;">Write 0 if no expenses</p>							
	A. School fees	B. Tuition	C. Text books	D. Other school supplies	E. Allowances for children studying away from home	F. Transport cost	G. Gifts to teachers, school building fund etc.	H. TOTAL (Col 16a - 16g)
	RIELS	RIELS	RIELS	RIELS	RIELS	RIELS	RIELS	RIELS
	(1)	(16a)	(16b)	(16c)	(16d)	(16e)	(16f)	(16g)
01								
02								
03								
04								
05								
06								
07								
08								
09								
10								
11								
12								
13								
14								
15								

Note: (Col. 16e) "Expenses on studying away from home" includes all amount of money spent (allowances) for the child's study, regardless of the distance from home to the school.

04. HOUSING

Respondent: Head of household, spouse of the head of household, or another adult household member

The following questions should be asked of the head of household, spouse of the head of household, or of another adult household member, if both head and spouse are absent.

Q1	How many households reside in the same housing unit as your household?	NUMBER OF HOUSEHOLDS:	<input type="text"/>	<input type="text"/>	<input type="text"/>														
Q2	What is the floor area of the housing/dwelling unit occupied by your household?	NUMBER OF SQUARE METERS:	<input type="text"/>	<input type="text"/>	<input type="text"/>														
Q3	How many rooms in the dwelling unit are used by the household (other than kitchen, toilet and bathrooms)?	NUMBER OF ROOMS:	<input type="text"/>	<input type="text"/>	<input type="text"/>														
Q4	What is the primary construction material of the wall of the housing/dwelling unit occupied by your household?	CODE: <input type="text"/>																	
<p>WALL CODES</p> <table> <tr> <td>1 = Bamboo, Thatch/leaves, Grass</td> <td>4 = Concrete, brick, stone</td> <td>7 = Makeshift, mixed materials</td> </tr> <tr> <td>2 = Wood or logs</td> <td>5 = Galvanized iron or aluminium or other metal sheets</td> <td>8 = Clay/dung with straw</td> </tr> <tr> <td>3 = Plywood</td> <td>6 = Fibrous cement/Asbestos</td> <td>9 = Other, specify</td> </tr> </table>						1 = Bamboo, Thatch/leaves, Grass	4 = Concrete, brick, stone	7 = Makeshift, mixed materials	2 = Wood or logs	5 = Galvanized iron or aluminium or other metal sheets	8 = Clay/dung with straw	3 = Plywood	6 = Fibrous cement/Asbestos	9 = Other, specify					
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Q5	What are the primary construction material of the roof of the housing / dwelling unit occupied by your household?	CODE: <input type="text"/>																	
<p>ROOF CODES</p> <table> <tr> <td>1 = Thatch/leaves/grass</td> <td>5 = Salvaged materials</td> <td>8 = Concrete</td> </tr> <tr> <td>2 = Tiles</td> <td>6 = Mixed but predominantly made of galvanized iron/aluminium, tiles or fibrous cement</td> <td>9 = Plastic sheet</td> </tr> <tr> <td>3 = Fibrous cement</td> <td>7 = Mixed but predominantly made of thatch/leave /grass or salvaged materials</td> <td>10 = Other (Specify)</td> </tr> <tr> <td>4 = Galvanized iron or aluminium</td> <td></td> <td></td> </tr> </table>						1 = Thatch/leaves/grass	5 = Salvaged materials	8 = Concrete	2 = Tiles	6 = Mixed but predominantly made of galvanized iron/aluminium, tiles or fibrous cement	9 = Plastic sheet	3 = Fibrous cement	7 = Mixed but predominantly made of thatch/leave /grass or salvaged materials	10 = Other (Specify)	4 = Galvanized iron or aluminium				
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Q6	What are the primary construction material of the floor of the housing / dwelling unit occupied by your household?	CODE: <input type="text"/>																	
<p>FLOOR CODES</p> <table> <tr> <td>1 = Earth, clay</td> <td>4 = Cement/Brick/Stone</td> <td>7 = Vinyl</td> </tr> <tr> <td>2 = Wooden planks</td> <td>5 = Parquet, polished wood</td> <td>8 = Ceramic tiles</td> </tr> <tr> <td>3 = Bamboo strips</td> <td>6 = Polished stone, marble</td> <td>9 = Other (Specify)</td> </tr> </table>						1 = Earth, clay	4 = Cement/Brick/Stone	7 = Vinyl	2 = Wooden planks	5 = Parquet, polished wood	8 = Ceramic tiles	3 = Bamboo strips	6 = Polished stone, marble	9 = Other (Specify)					
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Q7	What is your household's main source of lighting?	CODE: <input type="text"/>																	
<p>LIGHTING SOURCE CODES</p> <table> <tr> <td>1 = Publicly-provided electricity/City power</td> <td>3 = Battery</td> <td>5 = Candle</td> <td>7 = Solar</td> </tr> <tr> <td>2 = Generator</td> <td>4 = Kerosene lamp</td> <td>6 = None</td> <td>8 = Other (specify)</td> </tr> </table>						1 = Publicly-provided electricity/City power	3 = Battery	5 = Candle	7 = Solar	2 = Generator	4 = Kerosene lamp	6 = None	8 = Other (specify)						
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2 = Generator	4 = Kerosene lamp	6 = None	8 = Other (specify)																
Q8	What is your household's main source of drinking water in wet season?	CODE: <input type="text"/>																	
<p>DRINKING WATER SOURCE CODES IN WET SEASON</p> <table> <tr> <td>01 = Piped in dwelling or on premises (>> Q12)</td> <td>08 = Improved rainwater collection (catchment tank/concrete rain water collection needs to have all the following: completely closed, tap to withdraw water and at least 3000 litres capacity (>> Q12))</td> </tr> <tr> <td>02 = Public tap</td> <td>09 = Unimproved rainwater collection (>> Q12)</td> </tr> <tr> <td>03 = Tubed/piped well or borehole</td> <td>10 = Water bought from tanker truck or vendor (Vendor brought water home, write "0" in distance and >> Q12)</td> </tr> <tr> <td>04 = Protected dug well (including all of the following: lining, headwall, platform, cover)</td> <td>11 = Water bought from tanker truck or vendor (Any household member goes to collect, write distance in Q9 then ask Q10 and Q11.)</td> </tr> <tr> <td>05 = Unprotected dug well</td> <td>12 = Bottled water</td> </tr> <tr> <td>06 = Pond, river or stream (fetch water from pond, river, stream)</td> <td>13 = Other (Specify)</td> </tr> <tr> <td>07 = Pond, river or stream (pump to the house) (>> Q12)</td> <td></td> </tr> </table>						01 = Piped in dwelling or on premises (>> Q12)	08 = Improved rainwater collection (catchment tank/concrete rain water collection needs to have all the following: completely closed, tap to withdraw water and at least 3000 litres capacity (>> Q12))	02 = Public tap	09 = Unimproved rainwater collection (>> Q12)	03 = Tubed/piped well or borehole	10 = Water bought from tanker truck or vendor (Vendor brought water home, write "0" in distance and >> Q12)	04 = Protected dug well (including all of the following: lining, headwall, platform, cover)	11 = Water bought from tanker truck or vendor (Any household member goes to collect, write distance in Q9 then ask Q10 and Q11.)	05 = Unprotected dug well	12 = Bottled water	06 = Pond, river or stream (fetch water from pond, river, stream)	13 = Other (Specify)	07 = Pond, river or stream (pump to the house) (>> Q12)	
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06 = Pond, river or stream (fetch water from pond, river, stream)	13 = Other (Specify)																		
07 = Pond, river or stream (pump to the house) (>> Q12)																			
Q9	What is the distance from home to the drinking water source in wet season (source reported in Q8)?	METERS:	<input type="text"/>	<input type="text"/>	<input type="text"/>														
Q10	Which members of your household are fetching drinking water in the wet season?	IDcode (1)	<input type="text"/>	(2)	<input type="text"/>														
Q11	How many minutes per day do they spend in total on fetching drinking water in wet season?	MINUTES PER DAY:	<input type="text"/>	<input type="text"/>	<input type="text"/>														

04. HOUSING (CONTINUED)

Q12	What is your household's main source of drinking water in dry season? <u>DRINKING WATER SOURCE CODES IN DRY SEASON</u> <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 01 = Piped in dwelling or on premises (>> Q16) 02 = Public tap 03 = Tubed/piped well or borehole 04 = Protected dug well (including all of the following: Lining, headwall, platform, cover) 05 = Unprotected dug well 06 = Pond, river or stream (fetch water from pond, river, stream) 07 = Pond, river or stream (pump to the house) (>> Q16) </div> <div style="width: 48%;"> 08 = Improved rainwater collection (catchment tank/concrete rain water collection needs to have all the following: completely closed, tap to withdraw water and at least 3000 litres capacity (>> Q16) 09 = Unimproved rainwater collection (>> Q16) 10 = Water bought from tanker truck or vendor (Vendor brought water home, write "0" in distance and >> Q16) 11 = Water bought from tanker truck or vendor (Any household member goes to collect, write distance in Q13 then ask Q14 and Q15.) 12 = Bottled water 13 = Other (Specify) </div> </div>	CODE:	<input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>
Q13	What is the distance from home to the drinking water source in dry season (source reported in Q12)?	METERS:	<input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>
Q14	Which members of your household are fetching drinking water in the dry season?	IDcode	(1) <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> (2) <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> (3) <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>
Q15	How many minutes per day do they spend in total on fetching drinking water in dry season?	MINUTES PER DAY:	<input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>
Q16	How much water charges did your household pay last month? (Put "0" for not buying water source)	RIELS:	<input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/>
Q17	Did your household treat water in anyway to make it safer to drink during the last month? <div style="display: flex; justify-content: space-around; font-size: small;"> 1 = Yes, always 2 = Sometimes 3 = No, never (>>Q19) </div>		
Q18	How did you usually treat your drinking water during the last month? <div style="display: flex; justify-content: space-between; font-size: small;"> <div style="width: 20%;"> 1 = Yes 2 = No </div> <div style="width: 30%;"> a. Boil water? <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> b. Filter water? <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> </div> <div style="width: 30%;"> c. Chemical? <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> d. White alum? <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> </div> <div style="width: 20%;"> e. Other method (Specify)? <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> </div> </div>		
Q19a	What toilet facility does your household have within the premises? (in the area close to the dwelling) 1 = Pour flush (or flush) connected to sewerage 2 = Pour flush (or flush) to septic tank or pit 3 = Pour flush (or flush) to elsewhere (i.e. not a sewer or pit/tank) 4 = Pit latrine with slab 5 = Pit latrine without slab or open pit 6 = Latrine overhanging field or water (drop in the field, pond, lake, river, sea) 7 = None 8 = Other, specify	CODE:	<input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>
Q19b	What toilet facility does your household usually use? 1 = Toilet that we have 2 = Public toilet/pit latrine or shared with others (any type) 3 = Open land 4 = Other (Specify)	CODE:	<input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/>
Q20	How much did your household spend for sewage or waste water disposal last month? (Write 0 if nothing)	RIELS:	<input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/>
Q21	How much did your household spend for garbage collection last month? (Write 0 if nothing)	RIELS:	<input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/>

04. HOUSING (CONTINUED)

Q22	<p>(a) What type of fuel does your household mainly use for cooking?</p> <p>FUEL CODES</p> <table style="width: 100%;"> <tr> <td style="width: 50%;">1 = Firewood</td> <td style="width: 50%;">6 = Household generator (>> Q23)</td> </tr> <tr> <td>2 = Charcoal</td> <td>7 = None/don't cook (>> Q23)</td> </tr> <tr> <td>3 = Liquefied petroleum gas LPG (>> Q23)</td> <td>8 = Other (Specify) (>> Q23)</td> </tr> <tr> <td>4 = Kerosene (>> Q23)</td> <td></td> </tr> <tr> <td>5 = Publicly-provided electricity/City Power (>> Q23)</td> <td></td> </tr> </table>	1 = Firewood	6 = Household generator (>> Q23)	2 = Charcoal	7 = None/don't cook (>> Q23)	3 = Liquefied petroleum gas LPG (>> Q23)	8 = Other (Specify) (>> Q23)	4 = Kerosene (>> Q23)		5 = Publicly-provided electricity/City Power (>> Q23)		CODE: <input style="width: 50px;" type="text"/>
1 = Firewood	6 = Household generator (>> Q23)											
2 = Charcoal	7 = None/don't cook (>> Q23)											
3 = Liquefied petroleum gas LPG (>> Q23)	8 = Other (Specify) (>> Q23)											
4 = Kerosene (>> Q23)												
5 = Publicly-provided electricity/City Power (>> Q23)												
	<p>(b) Does the vendor bring the firewood/charcoal home?</p> <p style="text-align: right;">1 = Yes (>> Q23) <input style="width: 50px;" type="text"/> 2 = No</p>											
	<p>(c) Which household members are collecting or fetching firewood or charcoal?</p> <p style="text-align: right;">IDcode OF HH MEMBER (1) <input style="width: 30px;" type="text"/> (2) <input style="width: 30px;" type="text"/> (3) <input style="width: 30px;" type="text"/></p>											
	<p>(d) How many hours per week in total do they spend on collecting or fetching firewood/charcoal?</p>	<p>HOURS PER WEEK: <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> If less than one hour write '0'</p>										

Q23	<p>How much did the household spend on the following items last month (including lights and cooking)?</p> <p>INCLUDE THE VALUE OF OWN PRODUCTION OR RECEIVED AS PAYMENT IN KIND FOR WORK OR AS GIFT OR FREE COLLECTION</p> <p style="text-align: center;">(ENTER " 0 " IF DID NOT SPEND ANYTHING)</p>	<p>RIELS</p> <p>a. Electricity <input style="width: 100px;" type="text"/></p> <p>b. Gas (LPG) <input style="width: 100px;" type="text"/></p> <p>c. Kerosene <input style="width: 100px;" type="text"/></p> <p>d. Firewood <input style="width: 100px;" type="text"/></p> <p>e. Charcoal <input style="width: 100px;" type="text"/></p> <p>f. Battery <input style="width: 100px;" type="text"/></p> <p>g. Other (Specify) <input style="width: 100px;" type="text"/></p>
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Q24	<p>What's the legal status of the dwelling?</p> <p>LEGAL STATUS CODE</p> <p>1 = Owned by the household (>> Q25b) 2 = Not owned but no rent is paid (>> Q25b) 3 = Rented 4 = Other (Specify) (>> Q25b)</p>	CODE: <input style="width: 50px;" type="text"/>
Q25a	<p>If rented: How much did you pay for rent of this house last month? (=>> Q26)</p>	RIELS: <input style="width: 100px;" type="text"/>
Q25b	<p>How much would you have to pay per month to rent a similar dwelling? (Estimated value)</p>	RIELS: <input style="width: 100px;" type="text"/>
Q26	<p>Whether owned or rented: How much did you spend on maintenance and minor repairs of the dwelling last month?</p>	RIELS: <input style="width: 100px;" type="text"/>

05. HOUSEHOLD ECONOMIC ACTIVITIES

Respondent: head of household, spouse of the head of household or another adult household member

The following questions should be asked of the head of household, spouse of the head of household, or of another adult household member, if both head and spouse are absent.

05.A LAND OWNERSHIP

I would now like to ask you about all land owned or operated by your household. That means all land that is used or could be used for vegetable gardening, agricultural or farming activities - crop cultivation, livestock raising and private forestry. (Do not include residential land not used to any of these activities)

Q1a Has the household sold any open land in the last 12 months? 1 = YES 2 = NO (>> Q2) ☐

Q1b What was the primary reason/purpose for which you sold the land? 1 = To address family health issues
2 = Invest in business
3 = To weed or buy farm equipment or for other agricultural activities
4 = To pay debt
5 = To buy motor bike or cell phone or for other household consumption needs
6 = Rituals (marriage ceremony, funeral etc.)
7 = Other (specify) ☐

Q2 Does anyone in your household own or operate any land that is used / could be used for vegetable gardening, agricultural or farming activities (crop cultivation, livestock raising or private forestry)? 1 = YES 2 = NO (>> NEXT SECTION E) ☐

Q3 How many plots does your household own or operate? NUMBER OF PLOTS: ☐

Please list each plot that your household owns, or rent in from others, or used for free (including owned land that is rented out)

Note: Use additional questionnaires if there are more than 7 plots

PLOT NUMBER	What is the area of the plot in square meters (m ²)?	Do you own this land, rent it or have it in some other way? 1 = Own (>> 4a) 2 = Own, but rent out/pawned/granted (>> 5a) 3 = Rented in (>> 6a) 4 = Free use of land (>> 4a) 5 = Other (specify)	If owned or free use of land Col 3 = 1 or 4			If owned but rented out Col 3 = 2		
			How much would it cost to rent a plot like this in this village? In cash or in kind (>> Col 7)		For what time period?	How much rent do you receive for this plot? In cash or in kind (>> Col 7)		For what time period?
			Amount (if in cash) Quantity (if in kind)	Unit 1 = Riel 2 = Kg 3 = Other (specify)	1 = Month 2 = Season 3 = Year 4 = Other (specify)	Amount (if in cash) Quantity (if in kind)	Unit 1 = Riel 2 = Kg 3 = Other (specify)	1 = Month 2 = Season 3 = Year 4 = Other (specify)
(1)	(2)	(3)	(4a)	(4b)	(4c)	(5a)	(5b)	(5c)
01	m ²							
02	m ²							
03	m ²							
04	m ²							
05	m ²							
06	m ²							
07	m ²							

Note: (Col. 3) Pawned is treated as one single time rent paid. (Pawn amount=rent paid). Granted is treated as rented out (rent = 0).

Note: (Col. 3) If the land is rented out or pawned it cannot be used for collateral loan. If granted - it can be used for collateral loan.

05.A. LAND OWNERSHIP (CONTINUED)

Please fill out the detailed information for each of the plots your household owns or rent in from others or used for free (including owned land that is rented out)

PLOT NUMBER	If rented in Col 3 = 3			What type of land is it? 01 = Wet-season land 02 = Dry-season land 03 = Wet and dry season land 05 = Kitchen garden (backyard)/Chamkar land 06 = Land with permanent crops 07 = Land for raising livestock 08 = Private forestry land 09 = Idle land 10 = Other land (specify)	In what year did you first have/ start using this plot ? YEAR	How did you acquire it? 1 = Given by the government or local authority (>> 11) 2 = By inheritance or gift from relatives (>> 11) 3 = Bought it from a relative (>> 11) 4 = Bought it from a non-relative 5 = Cleared land/occupied for free (>> 11) 6 = Donated by friend (>> 11) 7 = Rented in (>> 11) 8 = Other (specify) (>>11)	If bought Col 9 = 3 or 4 How much did you pay to buy this plot? Riels
	How much rent do you pay for this plot? In cash or in kind	Unit 1 = Riel 2 = Kg 3 = Other (specify)	For what time period? 1 = Month 2 = Season 3 = Year 4 = Other (specify)				
	Amount (if in cash) Quantity (if in kind)						
(1)	(6a)	(6b)	(6c)	(7)	(8)	(9)	(10)
01							
02							
03							
04							
05							
06							
07							

Please fill out the detailed information for each of the plots your household owns or rent in from others or used for free (including owned land that is rented out)

PLOT NUMBER	All plots		Do you have a paper to certify your ownership or rental agreement? 1 = Yes 2 = Never had (>> 15) 3 = Lost it (>> 15) 4 = Don't know (>> 15)	If YES in Col 12 What kind of paper do you have? Enter answer given by respondent 1 = Application receipt 2 = Land investigation paper 3 = Certificate (title) from the government 4 = Paper from local authority 5 = Rental contract 6 = Other (specify) 7 = Don't know / not sure	Can you show me the document that you have for this plot? Enter 8 if do not see certificate 1 = Application receipt 2 = Land investigation paper 3 = Certificate (title) from the government 4 = Paper from local authority 5 = Rental contract 6 = Other (specify) 7 = Don't know / not sure 8 = No paper shown	Whose name is on the ownership document or rental contract? 1 = Head of household 2 = Spouse 3 = Both head of household and spouse 4 = Father 5 = Mother 6 = Other relative 7 = Other (specify)
	How much would it cost to buy a plot like this in this village today?					
	Riels					
(1)	(11)	(12)	(13a)	(13b)	(14)	
01						
02						
03						
04						
05						
06						
07						

Note: (Col. 14) If **both** the name of the head of household **and** the name of the spouse is written on the land title - than enter code "3".

05. A. LAND OWNERSHIP (CONTINUED)

Please fill out the detailed information for each of the plots your household owns or rent in from others (including owned land that is rented out)

PLOT NUMBER	Who is the plot manager? Write ID Code if a person in your household 77 = Other, female not in the household 88 = Other, male not in the household 99 = Unknown	Which crop did you grow on this plot in the last seasons? 1 = Rice 2 = Other crops (water melon, pumpkin, vegetables, maize, bean, potato, etc.) 3 = Fruit and nut trees (mango, coconut, cashew etc.) 4 = Rubber 5 = Bamboo shoots 6 = Bamboo tree 7 = Don't know which crop 8 = None Enter all crops (up to the 3 most important) if you grow more than one crop			Can you add water to this plot with irrigation and / or water pumped from the well? 1 = Yes, Wet season 2 = Yes, Dry season 3 = Yes, both seasons 4 = No, cannot irrigate or pump water at all for this plot	Have you made any investments on this plot since you acquired it? (record up to 3 most important investments) 1 = None (=> 20) 2 = Digging well 3 = Digging ditch / canal 4 = Terracing 5 = Drainage construction 6 = Soil reclamation 7 = Establish fruit and nut trees 8 = Other (specify) Enter the 3 most important			
	(1)	(15)	(16a)	(16b)	(16c)	(17)	(18a)	(18b)	(18c)
01									
02									
03									
04									
05									
06									
07									

Note: (Col. 15) It is not always the owner who is managing the plot. If e.g. the plot is granted to someone not belonging to the household than the person managing the plot is the "plot user". E.g. code "77" or "88" or even "99".

PLOT NUMBER	In what year did you make these investments? If more than one investment, ask about the most important	Can you use this plot as collateral for loan? 1 = Yes 2 = No (>> 22)	When did you start to have the rights to use it as a collateral? If don't know, leave blank	Have you ever had any conflict about this plot? 1 = Yes, now 2 = Yes, previously 3 = No
	YEAR		YEAR	
(1)	(19)	(20)	(21)	(22)
01				
02				
03				
04				
05				
06				
07				

NIS code

05. B. PRODUCTION OF CROPS (INCLUDING FRUITS AND VEGETABLES ETC.)

Please provide the following information on crops, including fruits and vegetables, grown by your household during the past two seasons. Please provide plot-wise details.

Note: Past wet-season should refer to the wet-season last calendar year.

If interview takes place in January - June: past dry-season should refer to the dry-season last calendar year.

If interview takes place in July - December: past dry-season should refer to the dry-season this calendar year.

Q1 Did your household produce any crops including fruits and vegetables during the past wet-season or the past dry-season?

1 = Yes 2 = No (> Part E)

SERIAL NUMBER	COPY THE PLOT NUMBER FROM PART A	What crop(s) have your household grown (on what plots)?		How big area was cultivated?	How big area was harvested?	How much was produced / harvested?	How much has been the post-harvest loss until the day of interview?	How much (quantity) was given as crop rent?	What was the sale price of the crop produced per kg?
		Name of crop or by-product	NIS code	m ²	m ²	KG	KG	KG	RIELS / Kg
(1)	(2)	(3a)	(3b)	(4)	(5)	(6)	(7)	(8)	(9)
PAST WET SEASON, What year?.....									
01				m ²	m ²				
02				m ²	m ²				
03				m ²	m ²				
04				m ²	m ²				
05				m ²	m ²				
06				m ²	m ²				
07				m ²	m ²				
08				m ²	m ²				
09				m ²	m ²				
10				m ²	m ²				
11									

PAST DRY SEASON, What year?.....									
12				m ²	m ²				
13				m ²	m ²				
14				m ²	m ²				
15				m ²	m ²				
16				m ²	m ²				
17				m ²	m ²				
18				m ²	m ²				
19				m ²	m ²				
20				m ²	m ²				
21				m ²	m ²				
22									

Note: If different crop on the plot, report the area cultivated for each crop, e.g. split the total plot into smaller areas. If cultivate twice on the same area during one season report the same area twice AND write a note. This is important! If the reported cultivated area is incorrect reported the total cultivated area in Cambodia can be overestimated

Note: Area harvested should only be reported if the household have produced any crop on the plot. If no production the harvested area should be '0'.

Note: Sale price means the price per kg the received when they sold the crop OR should have received if they had sold the crop they kept in storage. The sale price reported for different crop must be reasonable. If you are not sure, discuss with the supervisor.

Note: For Bamboo tree use m³ instead of kg.

NIS code

05. C. COST OF CULTIVATION OF CROPS (INCLUDING FRUITS AND VEGETABLES ETC.)

Please provide the following information on cost of cultivation of crops, including fruits and vegetables, grown by your household during the past two seasons.

Please provide plot-wise details.

SERIAL NUMBER	COPY THE PLOT NUMBER FROM PART B	Planting materials (seeds, seedlings, young plants): purchased/supplied from home production	Chemical fertilizers, pesticide, weedicide and fungicide	Animal and plant manure: purchased/supplied from home produce	Electricity for the farming (not including household use!)	Oil, gas or gasoline and diesel for the farming (not including household use!)	Storage items (e.g., burlap bags, plastic sheeting etc.)	Payment to hired draft power (tractors/ animals) including human labour, if any, for ploughing/ harrowing
		Write '0' if nothing	Write '0' if nothing	Write '0' if nothing	Write '0' if nothing	Write '0' if nothing	Write '0' if nothing	Write '0' if nothing
		RIELS	RIELS	RIELS	RIELS	RIELS	RIELS	RIELS
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
PAST WET SEASON								
01								
02								
03								
04								
05								
06								
07								
08								
09								
10								
11								
PAST DRY SEASON								
12								
13								
14								
15								
16								
17								
18								
19								
20								
21								
22								

05. C. COST OF CULTIVATION OF CROPS (INCLUDING FRUITS AND VEGETABLES ETC.) (CONTINUED)

Please provide the following information on cost of cultivation of crops, including fruits and vegetables, grown by your household during the past two seasons.

Please provide plot-wise details.

SERIAL NUMBER	Other hired labour charges (cash plus kind)	Irrigation charges	Services/ technical support from government and other agencies	Transportation of input materials, equipment and products	Repair and maintenance of farm house, farm equipment, animal shed etc.	Rental paid to owner for farm land, farm house, equipment etc. rented in from others	Total Col. 3-15
	Write '0' if nothing	Write '0' if nothing	Write '0' if nothing	Write '0' if nothing	Write '0' if nothing	Both in cash and in kind Write '0' if nothing	Write '0' if nothing
	RIELS	RIELS	RIELS	RIELS	RIELS	RIELS	RIELS
(1)	(10)	(11)	(12)	(13)	(14)	(15)	(16)
PAST WET SEASON							
01							
02							
03							
04							
05							
06							
07							
08							
09							
10							
11	TOTAL 01-10:						
PAST DRY SEASON							
12							
13							
14							
15							
16							
17							
18							
19							
20							
21							
22	TOTAL 12-21:						

NIS code

05. D. INVENTORY OF CROPS (INCLUDING FRUITS AND VEGETABLES ETC.)

Please provide the following information on crops, including fruits and vegetables, grown by your household and in storage December 31 last year.

Did your household have any crops in storage December 31 last year?

1 = Yes 2 = No (>> Part D2)

SERIAL NUMBER	Crop(s) that your household had in storage December 31 last year		How much of ...[CROP]... did your household have in storage at December 31 last year?	What was the sales price for ...[CROP]... per kg at December 31 last year ?
	Last year means 2011	NIS code		
	Crop Item		KG	RIELS/KG
(1)	(2a)	(2b)	(3)	(4)
01				
02				
03				
04				
05				
06				
07				
08				
09				
10				

NIS code

Note: In this module all finished crops (including fruits and vegetables etc.) shall be reported

05.D.2 SALES OF CROPS (INCLUDING FRUITS AND VEGETABLES ETC.)

Please provide the following information on crops (including fruits and vegetables etc.) grown by your household and sold the last 12 months.

Did your household sell any crops (rice, fruits, vegetables, etc.) during the last 12 months?

1 = Yes 2 = No (>> Part E)

SERIAL NUMBER	Crop(s) (rice, fruits, vegetables, etc.) that your household had sold during the last 12 months.		How much of ...[CROP]... did your household sell during the last 12 months?	What was the sales price for ...[CROP]... per kg? If different prices try to estimate an average price
		Crop Item		KG
(1)	(2a)	(2b)	(3)	(4)
01				
02				
03				
04				
05				

NIS code

05. E. INPUTS AND OUTPUTS OF LIVESTOCK AND POULTRY RAISING ACTIVITIES

Q1 Has your household or anyone in your household had any livestock in the past 12 months, that is from ..[MONTH].. last year? 1= Yes 2=No (>> Part F)

SERIAL NUMBER	Type of animal or bird	Has anyone in your household raised any ..[LIVESTOCK].. in the past 12 months? 1=Yes 2=no (>> Next animal / bird)	Number of ..[LIVE STOCK].. currently owned ?	Of the total ..[LIVE STOCK].. currently owned how many are female animals / bird?	What would be the total sales value of ..[LIVESTOCK].. currently owned?	Number of ...[LIVE STOCK].. owned 12 months ago, that is [in MONTH] last year?	Number of ..[LIVE- STOCK].. owned December 31 last year?	Total sales value of ..[LIVESTOCK].. owned December 31 last year at the pre-vailing prices?	Value of ..[LIVESTOCK].. sold during the past 12 months?
			If none, write '0'	If none, write '0'	Write '0' if nothing	If none, write '0'	If none write '0'	Write '0' if nothing	Write '0' if nothing
			NUMBER	NUMBER	RIELS	NUMBER	NUMBER	RIELS	RIELS
(1)	(2)	(3)	(4)	(5)	(6)	(7a)	(7b)	(8)	(9)
01	Cattle								
02	Buffaloes								
03	Horses, Ponies								
04	Pigs								
05	Sheep								
06	Goats								
07	Chickens								
08	Ducks								
09	Quail								
10	Other (specify)								
11	TOTAL 01 - 10:								

SERIAL NUMBER	Type of animal or bird	Total paid for .. LIVESTOCK].. bought during the past 12 months? Write '0' if nothing	Imputed value of meat products from livestock/poultry in riels		Value of other products than meat (milk, butter, eggs, hide and skin, manure etc.) sold, consumed in household, used as gifts etc. during the past 12 months		
			Consumed in the household during the past	Used for barter, gifts, charity, etc. during the	Sold	Consumed in household	Gifts, charity, barter etc.
			Write '0' if nothing	Write '0' if nothing			
		RIELS	RIELS	RIELS	RIELS	RIELS	RIELS
(1)	(2)	(10)	(11)	(12)	(13)	(14)	(15)
01	Cattle						
02	Buffaloes						
03	Horses, Ponies						
04	Pigs						
05	Sheep						
06	Goats						
07	Chickens						
08	Ducks						
09	Quail						
10	Other (specify)						
11	TOTAL 01 - 10:						

NIS code

05. E. INPUTS AND OUTPUTS OF LIVESTOCK AND PULTRY RAISING ACTIVITIES (CONTINUED)

ITEM NUMBER		How much did your household spend on the following items during the past 12 months? Write '0' if nothing
	ITEMS	AMOUNT IN RIELS
(1)	(2)	(3)
1	Feed and feed supplements (e.g. rice straw) for livestock/poultry - purchased	
2	Feed and feed supplements (e.g. rice straw) for livestock/poultry - supplied from home farm/public land	
3	Hired labour to care for the livestock/poultry (cash plus kind)	
4	Veterinary services and medicine	
5	Service /technical support from government/other agencies	
6	Transporting livestock/poultry, livestock/poultry products, manure, feed and feed supplements to/from market	
7	TOTAL 1 - 6:	

Note: If animal and poultry consider about the feed and feed supplements (in Item No 1 and 2).NIS code

05. F. INPUTS AND OUTPUTS FROM FISH CULTIVATION AND FISHING/TRAPPING OF AQUATIC PRODUCTS

Q1	Did your household or anyone in your household raise fish (or any other aquatic product like frogs or crocodiles) during the past 12 months?	1 = Yes 2 = No	<input type="text"/>
Q2	Does your household or anyone in your household own or operate a pond for fish or shrimp culture?	1 = Yes 2 = No (>> Q3)	<input type="text"/>

Note : Pond is a small body of standing water formed naturally or often artificially made. It is smaller than a lake.

POND NUMBER	Do you own this pond, rent it or have it some other way? 1 = Own 2 = Own, but rent out 3 = Rented in from others 4 = Free use of pond 5 = Other (specify)	AREA How many square meters is the pond?	MARKET VALUE How much would you have to pay to buy a pond like this in this village?	MONTHLY RENT How much would you have to pay monthly to rent a pond like this in this village?
		SQUARE METERS	RIELS	RIELS
(1)	(2)	(3)	(4)	(5)
1				
2				
3				

NIS code

Q3	Did your household or anyone in your household catch fish, shrimp, crabs, oysters, etc. during the past 12 months?	1 = Yes 2 = No	<input type="text"/>
-----------	--	-------------------	----------------------

If Yes on Q1 or Q2 or Q3, please ask the following questions. If No on all 3 questions (Q1-Q3) >> G

ITEM NUMBER	EXPENSES	Amount spent
	How much did your household spend on the following items during the past 12 months?	Write '0' if nothing
	ITEM	RIELS
(1)	(2)	(3)
01	Breeding stock for raising fish/shrimp etc.	
02	Feed for raising fish/shrimp etc.	
03	Hired labour (cash plus Kind)	
04	Ice	
05	Repair and maintenance of nets and traps etc.	
06	Repair and maintenance of boat	
07	Boat fuel	
08	Boat rent (cash)	
09	Cash rent for tank, if leased in	
10	Transportation of fish/shrimp/crab etc. to market	
11	Services (technical assistance) received	
12	Other (specify)	
13	Total 01 - 12:	

NIS code

05. F. INPUT AND OUTPUTS FROM FISH CULTIVATION AND FISHING/TRAPPING OF AQUATIC PRODUCTS (CONTINUED)

ITEM NUMBER	INCOME	Amount received
	How much did your household receive under the following item during the past 12 months?	Write '0' if nothing
	ITEM	RIELS
(1)	(2)	(3)
01	Proceeds from sale of fish, shrimp, crab etc. raised or captured (*)	
02	Value of fish, shrimp, crab etc. consumed in household	
03	Value of fish, shrimp, crab etc. given away as gift, charity, barter, etc.	
04	Value of fish, shrimp used for drying (dried fish/shrimp, smoked fish etc.)	
05	Value of fish, shrimp used for preparation of fish/shrimp sauce	
06	Value of fish, shrimp used for animal feed	
07	Value of fish, shrimp used for other (specify)	
08	Total 1 - 7:	

(*) Do not include fish, shrimp, crab etc. (paid in-kind) for renting boat or tank..

NIS code

05. G. INPUTS AND OUTPUTS FROM FORESTRY AND HUNTING

Q1 Did anyone in your household collect firewood, charcoal, timber or other forest products during the past 12 months?

1 = Yes 2 = No

Q2 Did anyone in your household collect palm juice, root crops, herbs, honey or hunt wild animals or birds during the past 12 months?

1 = Yes 2 = No

If YES on Q1 or Q2 ask the following questions, if NO on both of them >>Part H

PRODUCT NUMBER	INCOME	What were the value of products that your household collected in this way during the past 12 months?			
		Write '0' if nothing			Total amount (Col. 3 - 5)
		Receipts from sale of products gathered or hunted?	Imputed value of such products consumed in the household?	Imputed value of such products given away for gifts, charity, barter, etc.?	
	ITEM	RIELS	RIELS	RIELS	RIELS
(1)	(2)	(3)	(4)	(5)	(6)
01	Sawing logs				
02	Firewood				
03	Wood for charcoal				
04	Rattan, bamboo, palm leaves, other fibrous material				
05	Palm juice				
06	Root crops, fruits and vegetables				
07	Herbs				
08	Honey				
09	Wild animals and birds				
10	Other products (specify)				
11	Total 01 - 10:				

NIS code

05. G. INPUTS AND OUTPUTS FROM FORESTRY AND HUNTING (CONTINUED)

ITEM NUMBER	EXPENSES	Amount spent Write '0' if nothing
	How much did your household spend on the following items during the past 12 months?	
	ITEMS	RIELS
(1)	(2)	(3)
01	Transport costs including transport to market	
02	Fuel	
03	Draft animal feed	
04	Hired labour charges	
05	Tools, equipment, including maintenance	
06	Commissions, tips, rents, etc.	
07	Other (specify)	
08	Total 1 - 7:	

NIS code

05. H. LIST OF HOUSEHOLD NON-AGRICULTURAL ECONOMIC ACTIVITIES DURING THE PAST 12 MONTHS

Q1 Did anyone in your household run an enterprise or business during the past 12 months?

1 = Yes

2 = No (>> NEXT SECTION)

ACTIVITY NUMBER	DESCRIPTION OF THE ACTIVITY Write a clear description of the activity (see field manual page 65)	MAIN PRODUCT In this column the main product should be described	NIS INDUSTRY CODE	ID CODE OF								
				Main person running the enterprise/business	Other household members participating in the activity							
					1°	2°	3°	4°	5°	6°	7°	8°
(1)	(2)	(3)	(4)	(5)	(6a)	(6b)	(6c)	(6d)	(6e)	(6f)	(6g)	(6h)
01												
02												
03												
04												
05												
06												

Note: Use page 27-28 if there are more than 3 activities running by the household.

NIS code

Note: Write a clear description of the activity. For example: If a household produce and then sell the product (or by-product) they have produced, write that the household produce and also sell the produced product.

05. H. LIST OF HOUSEHOLD NON-AGRICULTURAL ECONOMIC ACTIVITIES DURING THE PAST 12 MONTHS (CONTINUED)

COST NUMBER	COST ITEM	How much did you spend on the different items listed for activity 1, during the past 12 months, that is since ..[MONTH].. last year? (Use the same question for activity 2 to 6) Write '0' if nothing		
		Activity 1 RIELS	Activity 2 RIELS	Activity 3 RIELS
(1)	(2)	(3)	(4)	(5)
01	Capital goods to be used for the production such as machines, cars, motorbikes			
02	Raw material used for processing <i>This item should be used for ALL kind of activity where you buy raw material: Rice for producing rice noodles, soya beans for producing Tofu, wood for making furniture, stone for making sculpture etc.</i>			
03	Materials used for construction			
04	Fuels used for production or generation of electricity, service etc.			
05	Lubricants			
06	Purchase of goods for resale (only trade) <i>Report all goods bought for resale in a shop, market etc. By resale means that the good is not used for processing, i.e. fresh vegetables bought from a farmer for resale fresh in the market, cigarettes bought to sell in a shop in front of the house etc.</i>			
07	Food, drink and tobacco products served to customers <i>All food, drinks and tobacco bought to serve to customers in "restaurants" (all places where food is served, even mobile restaurants), which means meat, vegetables for cooking, coca cola, beer, cigarettes etc.</i>			
08	Electricity purchased			
09	Water and sanitation charges			
10	Containers, packing materials			
11	Freight and transport expenses			
12	Insurance			
13	Bank charges			
14	Telephone, postage and other communication			
15	Office supplies, stationary and other items			
16	Rents paid for land, buildings, storage, warehousing, equipment & machines			
17	Repair/maintenance of buildings, equipment & machinery/material/services			
18	Registration and other govt. fees, taxes, market fees ("Phasy") and donations			
19	Wages/salaries of hired labour (cash plus kind)			
20	Services rendered by others (commissions, etc.)			
21	All other expenses not included in the list from 1 to 17 <i>Exclude Capital goods to be used for the production, such as machines, cars, motorbikes. They are registered in row 19 above.</i>			
22	Total 01 -21:			

Note: Use page 27-28 if there are more than 3 activities running by the household.

NIS code

05. H. LIST OF HOUSEHOLD NON-AGRICULTURAL ECONOMIC ACTIVITIES DURING THE PAST 12 MONTHS (CONTINUED)

REVENUE NUMBER	REVENUE ITEM	How much did your household receive under the different items listed for activity 1, during the past 12 months, that is since ..[MONTH].. last year? (Use the same question for activity 2 to 6)		
		Write '0' if nothing		
		Activity 1 RIELS	Activity 2 RIELS	Activity 3 RIELS
(1)	(2)	(3)	(4)	(5)
01	Receipts from sale of products and by-products from own production <i>Products and by-products which the household has produced by buying raw material or using own produced raw material</i>			
02	Charges for repair services			
03	Other professional and service charges and commissions, etc.			
04	Charges for construction work done			
05	Proceeds from sale of goods sold (only trade) <i>Proceeds for sale of goods you purchased for resale (see item 05 - cost item)</i>			
06	Charges for board and lodging			
07	Receipts from sales/services at hotels/restaurants <i>All kind of restaurants, include small restaurant in front of the house,</i>			
08	Charges for transport services provided (taxi, mol			
09	Imputed value of products/goods for resale, etc. consumed in the household			
10	Imputed value of products/by-products used as intermediate goods			
11	Imputed value of products/by-products used as gifts, charity, etc.			
12	Supply of electricity, gas and water			
13	Rental income from land & buildings & storage & warehousing			
14	Rental income from equipment and machinery			
15	Charges for financial / insurance / real estate services			
16	Charges for medical services			
17	Charges for educational services			
18	Charges for recreational and cultural services			
19	Charges for other community, social and personal services			
20	All other income receipts and charges from the activity not included in (01-19)			
21	Total 01 - 20:			

NIS code

Note: Use page 27-28 if there are more than 3 activities running by the household.

05. H. LIST OF HOUSEHOLD NON-AGRICULTURAL ECONOMIC ACTIVITIES DURING THE PAST 12 MONTHS (CONTINUED)

COST NUMBER	COST ITEM	How much did you spend on the different items listed for activity 1, during the past 12 months, that is since ..[MONTH].. last year? (Use the same question for activity 2 to 6) Write '0' if nothing		
		Activity 4 RIELS	Activity 5 RIELS	Activity 6 RIELS
(1)	(2)	(6)	(7)	(8)
01	Capital goods to be used for the production such as machines, cars, motorbikes			
02	Raw material used for processing <i>This item should be used for ALL kind of activity where you buy raw material: Rice for producing rice noodles, soya beans for producing Tofu, wood for making furniture, stone for making sculpture etc.</i>			
03	Materials used for construction			
04	Fuels used for production or generation of electricity, service etc.			
05	Lubricants			
06	Purchase of goods for resale (only trade) <i>Report all goods bought for resale in a shop, market etc. By resale means that the good is not used for processing, i.e. fresh vegetables bought from a farmer for resale fresh in the market, cigarettes bought to sell in a shop in front of the house etc.</i>			
07	Food, drink and tobacco products served to customers <i>All food, drinks and tobacco bought to serve to customers in "restaurants" (all places where food is served, even mobile restaurants), which means meat, vegetables for cooking, coca cola, beer, cigarettes etc.</i>			
08	Electricity purchased			
09	Water and sanitation charges			
10	Containers, packing materials			
11	Freight and transport expenses			
12	Insurance			
13	Bank charges			
14	Telephone, postage and other communication			
15	Office supplies, stationary and other items			
16	Rents paid for land, buildings, storage, warehousing, equipment & machines			
17	Repair/maintenance of buildings, equipment & machinery/material/services			
18	Registration and other govt. fees, taxes, market fees ("Phasy") and donations			
19	Wages/salaries of hired labour (cash plus kind)			
20	Services rendered by others (commissions, etc.)			
21	All other expenses not included in the list from 1 to 17 <i>Exclude Capital goods to be used for the production, such</i>			
22	Total 01 -21:			

NIS code

REVENUE NUMBER	REVENUE ITEM	How much did your household receive under the different items listed for activity 1, during the past 12 months, that is since ..[MONTH].. last year? (Use the same question for activity 2 to 6)		
		Activity 4 RIELS	Activity 5 RIELS	Activity 6 RIELS
(1)	(2)	(6)	(7)	(8)
01	Receipts from sale of products and by-products from own production <i>Products and by-products which the household has produced by buying raw material or using own produced raw material</i>			
02	Charges for repair services			
03	Other professional and service charges and commissions, etc.			
04	Charges for construction work done			
05	Proceeds from sale of goods sold (only trade) <i>Proceeds for sale of goods you purchased for resale (see item 05 - cost item)</i>			
06	Charges for board and lodging			
07	Receipts from sales/services at hotels/restaurants <i>All kind of restaurants, include small restaurant in front of the house,</i>			
08	Charges for transport services provided (taxi, mol			
09	Imputed value of products/goods for resale, etc. consumed in the household			
10	Imputed value of products/by-products used as intermediate goods			
11	Imputed value of products/by-products used as gifts, charity, etc.			
12	Supply of electricity, gas and water			
13	Rental income from land & buildings & storage & warehousing			
14	Rental income from equipment and machinery			
15	Charges for financial / insurance / real estate services			
16	Charges for medical services			
17	Charges for educational services			
18	Charges for recreational and cultural services			
19	Charges for other community, social and personal services			
20	All other income receipts and charges from the activity not included in (01-19)			
21	Total 01 - 20:			

NIS code

06. HOUSEHOLD LIABILITIES

Respondent: Head of household, spouse of the head of household, or another adult household member

Q1 Does your household have outstanding debts to other households or institutions?

1 = Yes

2 = No (>> NEXT SECTION)

LOAN NUMBER	How old is the debt? (In completed months)	In how many months will the debt be fully paid back?	From whom did your household obtain the loan?	What was the primary purpose for which your household borrowed the money?	What was the total amount borrowed?	How much is the outstanding loan now (this month)?	If interest is charged, what is the monthly rate of interest?
	Since how many months did your household obtain the loan	Note: How many months from this month				Interest should not be included	Refer to the outstanding loan in Col 7
	Put '0' if less than one month	Put '0' if less than one month					If no interest, write '0'
	MONTHS	MONTHS	If more than one enter the most important		RIELS	RIELS	PERCENTAGE
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
01							
02							
03							
04							
05							
06							

07. HOUSEHOLD INCOME FROM OTHER SOURCES

Respondent: Head of household, spouse of the head of household, or another adult household member

SOURCE NUMBER	REVENUE ITEMS	How much did your household receive from ..[SOURCE].. during the last 12 months?		
		From Cambodia	From abroad	Total (Col 3 + Col 4)
		Write '0' if nothing IN RIELS	Write '0' if nothing IN RIELS	Write '0' if nothing IN RIELS
(1)	(2)	(3)	(4)	(5)
01	Pensions, social welfare/benefits, provident fund			
02	Remittances from other relatives or others			
03	Governmental scholarships, stipends for any student member of the household			
04	Other scholarships, stipends for any student member of the household (NGO, private institutions etc.)			
05	Transfers (assistance/support) from NGO or other institutions (not credit)			
06	Income from lottery and gambling (Include all kind of lottery and gambling winnings)			
07	Bank interests			
08	Dividends			
09	Interests on loans to others (only interest)			
10	Imputed value of goods received through barter (not recorded elsewhere)			
11	Imputed value of gifts received (not recorded elsewhere)			
12	Sold land			
13	Other sold property such as house, car, jewellery			
14	Other (not included in 1 to 14)			
15	Total received: 01 - 14:			

Note: Income from economic activity will be reported in module 05 (agricultural and non-agricultural activity) and in module 15 (salary if paid employee)

8. CONSTRUCTION ACTIVITIES IN THE PAST 12 MONTHS

Respondent: Head of household, spouse of the head of household, or another adult household member

Q1 Does the household own its own dwelling or any other building(s) used for residential, agricultural, commercial or industrial purposes?

Note: This section refer to all buildings owned by the household, that means the building the household live in and all other buildings that are owned by the household

1 = Yes

2 = No (>> NEXT SECTION)

BUILDING NUMBER	What is the building used for? 1 = Residential 2 = Agricultural 3 = Commercial (purchase/sale of goods and services) 4 = Industrial (manufacturing) Enter the three most important			What is the total area for living or other use of the building? SQUARE METERS	What year was the building constructed? Enter the year when the construction was finished Leave blank if not yet finished	How much would you have to pay to buy a building like this in the village (where the building is located)? If don't know, leave blank	How much would you have to pay per month to rent a building like this in the village (where the building is located)? If don't know, leave blank	Is any part of this building rented out? 1 = Yes 2 = No (>> 9)	How much does your household receive in monthly rent for this building? RIELS	Was this building constructed, extended or repaired in the last 12 months that is, since ..[MONTH].. last year? 1 = Yes 2 = No (>> NEXT BUILDING)	
											YEAR
	(1)	(2a)	(2b)	(2c)	(3)	(4)	(5)	(6)	(7)		(8)
	1										
2											
3											
4											

BUILDING NUMBER	What kind of work was it? 1 = Constructed 2 = Extension (>>14) 3 = Repair (>> 14) Enter the most important	In what year and month did the construction start?		In what year and month did people start to use this building? (if not yet used leave it blank for month and year)		Who built this building? 1 = Household members only 2 = Household members and other relatives 3 = Household members and hired help 4 = Contracted builder 5 = Other (specify)	How much did your household pay those who helped constructing, extending or repairing this building (hired or contracted)? Write '0' if nothing and leave it blank if don't know For building still under work ask for the cost up till now
		MONTH	YEAR	MONTH	YEAR		
	(1)	(10)	(11a)	(11b)	(12a)	(12b)	(13)
1							
2							
3							
4							

Note: If the kind of work is both extension and repair report "Extension" and include reparation in the amount in column 14-16

8. CONSTRUCTION ACTIVITIES IN THE PAST 12 MONTHS (Continued)

BUILDING NUMBER	How much did your household spend for materials? Write '0' if nothing and leave it blank if don't know For building still under work ask for the cost up till now	If not possible to separate labour and materials: How much were the total costs?	If anyone in the household has put in own labour for constructing, extending or repairing this building try to estimate the value of it as if you had engaged someone to do it? Write '0' if nothing	If anyone else not belonging to the household has put in own labour try to estimate the value of it as if you had engaged someone to do it? Write '0' if nothing	For buildings not yet completed: What is the estimated remaining cost of the building's construction, extension or repair to be completed?
	RIELS	RIELS	RIELS	RIELS	RIELS
(1)	(15)	(16)	(17)	(18)	(19)
1					
2					
3					
4					

Note: If the household cannot separate the costs for labour and material fill out column 16 and leave column 14 and 15 blank.

09. DURABLE GOODS

Respondent: Head of household, spouse of the head of household, or another adult household member

ITEM NUMBER	How many of the following items does your household own? (Write '0' if none and => Next item)			Did you buy it, receive it as a gift, as pay for work or in other way? If more than one item ask for each item and put a code in each column. If more than 4 ask for the 4 most recent				How many of this (these) ..[ITEM].. were acquired or received...:		For items bought or received within the last 12 months:	For items bought or received before the last 12 months:
	ITEM	PRO- DUCT CODE	TOTAL NUMBER	1 = Purchased	2 = Payment for services	3 = Received as a gift	4 = Other (specify)	a. Within the last 12 months?	b. Before the last 12 months?	What was the purchase value (or the imputed value) of all these ..[ITEM]s..?	According to current prices, what do you think you could get if you sold ..[ITEM]s..?
(1)	(2)	(3)	(4)	(5a)	(5b)	(5c)	(5d)	(6a)	(6b)	RIELS	RIELS
Home Electronics											
01	Radio (Vitju)	801									
02	Television (TV)	802									
03	Telephone	817									
04	Cell phone	818									
05	Video/VCD/DVD player/recorder	807									
06	Stereo	808									
07	Camera (picture/video)	809									
08	Satellite dish	824									
Personal transport											
09	Bicycle (including bicycle with battery help engine)	803									
10	Motorcycle (including electrical moto's)	804									
11	Car	829									
12	Jeep/Van	830									
Household equipment											
13	Sewing machine	806									
14	Refrigerator	810									
15	Electric Kitchen/Gas Stove	813									
16	Washing machine	819									
17	Dishwasher	820									
18	Freezer	821									
19	Vacuum cleaner	822									
20	Electric iron	823									
21	Electric fan	811									
22	Air conditioner	812									
23	Suitcases/box for store/ travelling	890									

Note: 23 includes wooden boxes used when travel, bigger canvas bags with zipper (or the like) and bigger back packers etc.

09. DURABLE GOODS

ITEM NUMBER	How many of the following items does your household own? (Write '0' if none and >> Next item)			Did you buy it, receive it as a gift, as pay for work or in other way? If more than one item ask for each item and put a code in each column. If more than 4 ask for the 4 most recent 1 = Purchased 2 = Payment for services 3 = Received as a gift 4 = Other (specify)				How many of this (these) ..[ITEM].. were acquired or received....:		For items bought or received within the last 12 months:	For items bought or received before the last 12 months:
	ITEM	PRODUCT CODE	TOTAL NUMBER	(5a)	(5b)	(5c)	(5d)	(6a)	(6b)	What was the purchase value (or the imputed value) of all these ..[ITEM]s..?	According to current prices, what do you think you could get if you sold ..[ITEM]s..?
										RIELS	RIELS
(1)	(2)	(3)	(4)	(5a)	(5b)	(5c)	(5d)	(6a)	(6b)	(7)	(8)
24	Generator	816									
25	Batteries	891									
Furniture											
26	Sofa set	814									
27	Dining set (dining table + chairs)	815									
28	Bed sets (Bed, Mattress...*)	892									
29	Wardrobe, cabinets	893									
Computers and printers											
30	Computer (desktop or laptop)	825									
31	Printer	826									
Recreation											
32	Musical instruments	827									
33	Sport equipment	828									
Water transport											
34	Rowing boat	831									
35	Motor Boat	832									
Agriculture and other production											
36	Cart (pulled by animal)	805									
37	Tractor	833									
38	Bulldozer/roller	834									
39	Plough	835									
40	Threshing machine	837									
41	Harrow/rake/hoel/spade/axe...	838									
42	Hand Tractor (Kou Yon)	839									
43	Rice mill	840									
44	Water pump	836									
Other items											
45	Other (specify)	841									
46	Other (specify)	894									

*) Refer to the bed. If the household only have a bed (without a mattress, cushions etc ...) report that.

10. MATERNAL HEALTH

Respondent: All women with living children under 5 years old

LAST PREGNANCY & DELIVERY

Q1 Are there any women living in the household with living children under 5 years old?

1= Yes 2=No (>> SECTION 11)

Note: The child can be living in another household.

Please provide the following information on the last pregnancy. Ask the woman personally!

SERIAL NUMBER	COPY ID CODE OF THE MOTHER FROM ROSTER	ID No. of child if living in the household Leave blank if the child is not living in the household	During this pregnancy did you suffer from night blindness?	Did you see anyone for antenatal care for this pregnancy?	Where did you give birth?	Who assisted you in the delivery of the child?			
			1 = Yes 2 = No 8 = Don't know	1 = Yes 2 = No 8 = Don't know	Enter Code If don't know enter '98'	1 = Doctor/Medical assistant 2 = Nurse 3 = Midwife 4 = Traditional birth attendant 5 = Relative/friend 6 = Other (Specify) 7 = None Leave it blank if don't know (Enter up to 4 most important persons)	(7a)	(7b)	(7c)
(1)	(2)	(3)	(4)	(5)	(6)				
01									
02									
03									
04									

Note: If the woman is not in the household (absent) during the interview month, leave blank in column 4-7.

Codes for col. 6

Home:
01 = Your home
02 = Midwife/TBA home
03 = Other home (specify)
Public sector:
04 = National Hospital (PP)
05 = Province Hospital (RH)
06 = District Hospital (RH)
07 = Health Centre
08 = Health Post
09 = Military Hospital
10 = Other Public (Specify)
Private Medical Sector
11 = Private Hospital
12 = Private Clinic
13 = Other Private (Specify)
Other:
14 = Other (Specify)

11. CHILD HEALTH

Respondents: Mothers or caretakers of children under 2 years old

YOUNGEST CHILD & ALL CHILDREN UNDER 2

Q1 Check in the household list if there are any children 00-23 months old living in the household?

1= Yes 2=No (>> SECTION 13)

Please provide the following information on the youngest child of each mother and all children 00-23 month old

SERIAL NUMBER	COPY ID CODE OF THE MOTHER FROM ROSTER Leave blank if the mother/caretaker is not living in the household	COPY ID CODE OF THE CHILD FROM ROSTER	Is this your youngest child? 1 = Yes 2 = No (>> 9)	Did you ever breastfeed your child? 1 = Yes 2 = No (>> 9)	How long after birth did you first put the child to the breast? If less than one hour record '00' hours If less than 24 hours record hours Otherwise record days If don't know, leave blank		Are you still breastfeeding? 1 = Yes 2 = No
					HOURS	DAYS	
(1)	(2)	(3)	(4)	(5)	(6a)	(6b)	(7)
01							
02							
03							
04							
05							
06							
07							

SERIAL NUMBER	Now I would like to ask you about liquids your child drank yesterday during day or night. Did your child drink		Have this child ever received a vaccination? 1 = Yes 2 = No (>> NEXT CHILD) 8 = Don't know (>> NEXT CHILD)	Where did the child receive most of the vaccinations? 1 = Outreach activities 2 = Health centre 3 = National, provincial, district hospital 4 = Private clinic 5 = Other (specify)	Do you have a yellow card where [NAME]'s vaccinations are written down? If 'Yes': Can I see the yellow card? 1 = Yes 2 = No (>> NEXT CHILD)
	A A. Infant formula or any other milk such as tinned, condensed or fresh animal milk 1 = Yes 2 = No 8 = Don't know	B B. Plain water, fruit juice such as coconut juice, tea			
(1)	(8a)	(8b)	(9)	(10)	(11)
01					
02					
03					
04					
05					
06					
07					

13. HEALTH CARE SEEKING & EXPENDITURE

Respondent: Head of household or the spouse of the head of household

The following questions should be asked of the head of household, spouse of the head of household, or another adult household member, if both head and spouse are absent.

A. SUBSIDIZED HOUSEHOLD HEALTHCARE

Q1	In the last 12 months , has any member of the household received free or subsidized health care that other people would normally have to pay for? (including private health insurance)	1 = Yes	2 = No (>> Q4)	8 = Don't know	<input type="text"/>
Q2	How did they obtain this free / subsidized treatment?	1 = Household Priority Access Card, Equity Card, or other document that allows free or subsidized health care 2 = Name(s) are on a List of Poor Households held by the local authorities 3 = Health facility staff asked them questions from a list / filled out a form before treatment 4 = Health facility staff provided free treatment (without asking questions or filling out a form) 5 = Have private health insurance 6 = Belong to community health insurance scheme 7 = Other (specify) 8 = Don't know			a. <input type="text"/> b. <input type="text"/> c. <input type="text"/>
<div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p>If the household has obtained free / subsidized treatment in more than one way, record up to the 3 ways.</p> <p>If more than 3 ways record the most recent</p> </div>					
Q3	When they received free / subsidized treatment, were they treated the same as other people who were paying for their healthcare?	1 = Yes, always treated the same	4 = No, most times not treated the same	5 = No, never treated the same	<input type="text"/>
		2 = Yes, most times treated the same	3 = Sometimes yes, sometimes no	8 = Don't know	
Q4	If Q1 = 2, Otherwise (>> Col.2 next page) Do you or any member of the household have a Priority Access Card, Equity Card, or any other document that allows free or subsidized health care?	1 = Yes	2 = No	8 = Don't know	<input type="text"/>

13. HEALTH CARE SEEKING & EXPENDITURE (CONTINUED)

Respondent: Head of household or the spouse of the head of household

Please provide information on all members who usually reside in this household.

B ILLNESS AND HEALTHCARE EXPENDITURE DURING THE LAST 30 DAYS

ID NUMBER	Please tell me if any member of your household is sick, has an illness or injury now or at any time in the last 30 days. 1 = Yes 2 = No (>> 7)	If an illness What kind of illness (main presenting) did ... [Name] ... have in the last 30 days? 1 = Fever 2 = Cough 3 = Diarrhoea 4 = Flu 5 = Other (specify) Only ask if an illness If injury leave blank	If an illness Did ... [Name] ... have this illness for more than one year already? It should be the same illness that comes and goes (chronic) 1 = Yes 2 = No If injury leave blank	Was ... [NAME] ... so ill (because of illness/injury) that s/he could not do his/her usual activities? Refer to the last 30 days 1 = Yes 2 = No (>> 6) 3 = No usual activities (>> 6) (e.g. small children, old person, etc.)	How many days did this illness/injury stopped ... [NAME] ... from doing usual activities?	Was consultation or treatment sought for this illness/injury? Refer to the last 30 days 1 = Yes 2 = No	Has there been any other reason to go to a health facility or seek health care? If no, PROBE Has this person received care in relation to a pregnancy, immunization or supplementation? 1 = Antenatal care 2 = Delivery 3 = Postnatal care 4 = Vitamin A or deworming 5 = Health check 6 = Other (specify) Register 0 if no.
					Enter number of Refer to the last 30 days Number of days		
(1)	(2)	(2a)	(3)	(4)	(5)	(6)	(7)
01							
02							
03							
04							
05							
06							
07							
08							
09							
10							
11							
12							
13							
14							
15							

Note: The first 3 codes in column 7 are valid only for women. Code 5 means health checks for students, for work, HIV before marriage etc.

13. HEALTH CARE SEEKING & EXPENDITURE (CONTINUED)

Respondent: Head of household or the spouse of the head of household

Please provide information on all members who usually reside in this household.

B ILLNESS AND HEALTHCARE EXPENDITURE (CONTINUED)

ID NUMBER	In the last thirty days, how many times did [NAME] seek health care for illness, injury, or any other reason? If 0, PROBE. Has this person bought medicine or consulted with kru khmer, a traditional birth attendant, or a monk Enter number of times sought health If '0' >> NEXT PERSON	In the past 30 days, which was the first provider that was consulted for [NAME]'s health? Enter Code (See below) If don't know enter '98'	Ask if answer in Col. 8 is more than 1 In the past 30 days, which was the last / most recent provider that was consulted for [NAME]'s health? Enter Code (See below) If don't know enter '98'	Was ..[NAME].. hospitalised for the treatment/ care during the last 30 days? 1 = Yes 2 = No Include treatment/care in other countries If '2' >> Col (10)	How many nights was ..[NAME].. hospitalised during the last 30 days? Include treatment/care in other countries	How much in total was spent on transport to go to and return from any health provider in the past 30 days? Include expenditure for treatment/care in other countries Write '0' if nothing	How much in total was spent on treatment at any health provider in the past 30 days? Include expenditure for treatment/care in other countries Write '0' if nothing	How was the treatment financed? 1 = Household income 2 = Savings 3 = Borrowing 4 = Selling assets 5 = Selling household production in advance 6 = Other sources (specify) Enter the 3 with the highest amounts			
	(1)	(8)	(9a)	(9b)	(9c)	(9d)	(10)	(11)	(12a)	(12b)	(12c)
01											
02											
03											
04											
05											
06											
07											
08											
09											
10											
11											
12											
13											
14											
15											

Codes for col. 9a and 9b		
Public sector:	Private medical sector:	Not medical sector:
01 = National hospital (PP)	08 = Private hospital	14 = Shop selling drugs/market
02 = Provincial hospital (RH)	09 = Private clinic	15 = Kru Khmer/ Magician
03 = District hospital (RH)	10 = Private pharmacy	16 = Monk/religious leader
04 = Health centre	11 = Home/Office of trained health worker/nurse	17 = Traditional birth attendant
05 = Health post	12 = Visit of trained health worker/nurse	18 = Other (Specify)
06 = Provincial rehabilitation centre (PRC)		
or Community based rehabilitation (CBR)		
07 = Other publ	13 = Other private medical (Specify)	

14. DISABILITY

Respondent: Head of household or the spouse of the head of household

Please provide information on all members who usually reside in this household.

ID NUMBER	Does ..[NAME].. have any of the following? Enter the 3 most important 01 = Difficulty seeing 02 = Difficulty hearing 03 = Difficulty speaking 04 = Difficulty moving 05 = Difficulties in feeling or sensing 06 = Psychological or behavioural difficulties 07 = Learning difficulties 08 = Fits 09 = Other (specify) 98 = Don't know Enter '0' if none, (>> NEXT PERSON)			Is the difficulty ... 1 = Mild 2 = Moderate 3 = Severe Enter one code for each of the difficulties reported in Col 2a-2c			What was the cause? 01 = Mine/UXO 02 = Traffic Accident 03 = Work Accident 04 = Disease(s) 05 = Congenital 06 = Fever 07 = Difficulty Delivery 08 = Chemical Accident 09 = Rape 10 = Violent Attack 11 = Domestic Violent 12 = Suicide Attempt 13 = Mental Trauma due to war and other traumatic events 14 = War Injuries 15 = Malnutrition 16 = Burns 17 = Torture 18 = Old Age 19 = Other (specify) 98 = Don't know Enter one code (the most important) for each of the difficulties reported in Col 2a-2c			
	(1)	(2a)	(2b)	(2c)	(3a)	(3b)	(3c)	(4a)	(4b)	(4c)
01										
02										
03										
04										
05										
06										
07										
08										
09										
10										
11										
12										
13										
14										
15										

14. DISABILITY (CONTINUED)

Respondent: Head of household or the spouse of the head of household

Please provide information on all members who usually reside in this household.

ID NUMBER	Does the difficulty/difficulties prevent ..[NAME].. from participation or access to any of the following? 1 = Education (ask if aged 3 or over) 2 = Housing 3 = Land ownership (ask if aged over 18) 4 = Employment and income generation 5 = Health services 6 = Transport Enter the three most important Leave blank if "None"		
	(1)	(5a)	(5b)
01			
02			
03			
04			
05			
06			
07			
08			
09			
10			
11			
12			
13			
14			
15			

15. CURRENT ECONOMIC ACTIVITY

Respondents: All household members aged 5 years and older

ACTIVITY STATUS DURING THE PAST 7 DAYS

Please provide information on all members aged 5 years and older who usually reside in this household. Try to interview the household members individually

Please provide information of all members aged 5 years and older who usually reside in this household. Try to interview the household members individually					
ID NUMBER	ID NUMBER OF RESPONDENT	Did ..[NAME].. do any work at all, even one hour, during the past 7 days, i.e. - worked or helped on a farm, grinding grain, making palm sugar, caring for animals, weaving etc. - worked in a business or workplace (private or public sector, own account or in business belonging to someone else in your household 1 = Yes (>> 5) 2 = No	Although ..[NAME].. did not work even for one hour during the past 7 days, did ..[NAME].. have a economic activity from which he/she was temporarily absent? (e.g.: absent due to holiday or illness) 1 = Yes 2 = No (>>26)	What was ..[NAME].. 's main occupation/economic activity during the past 7 days?	NIS OCC: CODE
				<p>Note: beggar and sex worker are occupations</p> <p>Occupation description</p>	
(1)	(2)	(3)	(4)	(5a)	(5b)
01					
02					
03					
04					
05					
06					
07					
08					
09					
10					
11					
12					
13					
14					
15					

15. CURRENT ECONOMIC ACTIVITY (CONTINUED)

Respondents: All household members aged 5 years and older

ACTIVITY STATUS DURING THE PAST 7 DAYS (CONTINUED)

ID NUMBER	In what kind of industry/business (economic activity) did ..[NAME].. work in his/her main occupation/activity (e.g. agriculture, manufacturing, construction, hotel/restaurant, trade)?	NIS ISIC CODE	Under what type of employer did ..[NAME].. work in his/her main occupation/economic activity?	What was ..[NAME]..s employment status in his/her main occupation/economic activity?
	Industry description			
(1)	(6a)	(6b)	(7)	(8)
01				
02				
03				
04				
05				
06				
07				
08				
09				
10				
11				
12				
13				
14				
15				

Respondents: All household members aged 5 years and older

ID NUMBER	If Col. 3 = 1 (Work during the past 7 days) Otherwise (>> 10b)	How many days did ..[NAME].. work in his/her main occupation/ economic activity during the past month?	If Col 3 = 1 (Work during the past 7 days) or Col 4 = 1 (temporary absent)	If Col. 10b = 2 Is..[NAME]..`s work the past 7 days in the main occupation /economic activity seasonal?	If Col 3 = 1 (Work during the past 7 days) or Col 4 = 1 (temporary absent)	Besides ..[NAME]..`s main occupation/economic activity, how many additional economic activities did he/she have during the past 7 days?
	How many hours did ..[NAME]..work in his/her main occupation/economic activity during the past 7 days?		Does ..[NAME].. work the whole year in the main occupation/economic activity ? 1 = Yes (>>10d) 2 = No	Note: Seasonal is work done only part of the year but the same job is reoccurring every year. 1 = Yes 2 = No	Is..[NAME]..`s main occupation/ economic activity done in a foreign country? 1 = Yes 2 = No	Enter '0' if no more economic activities (>> 20)
	HOURS	DAYS				NO OF ECON.ACTIVITIES
(1)	(9)	(10a)	(10b)	(10c)	(10d)	(11)
01						
02						
03						
04						
05						
06						
07						
08						
09						
10						
11						
12						
13						
14						
15						

Construction: Not being able to work with road construction during wet season.

Salt field worker: During wet season not possible to extract salt out of sea water. When not working no salary paid.

Teachers: When not schooling teachers having vacation. As they have salary during vacation this is not seasonal work.

15. CURRENT ECONOMIC ACTIVITY (CONTINUED)

Respondents: All household members aged 5 years and older

ACTIVITY STATUS DURING THE PAST 7 DAYS (CONTINUED)

ID NUMBER	What was ..[NAME].. 's secondary occupation/economic activity during the past 7 days?		In what kind of industry/business (economic activity) did ..[NAME].. work in his/her secondary occupation/economic activity (e.g. agriculture, manufacturing, construction, hotel/restaurant, trade)?	
	Note: beggar and sex worker are occupations			
	Occupation description	NIS OCC: CODE	Industry description	NIS ISIC CODE
(1)	(12a)	(12b)	(13a)	(13b)
01				
02				
03				
04				
05				
06				
07				
08				
09				
10				
11				
12				
13				
14				
15				

15. CURRENT ECONOMIC ACTIVITY (CONTINUED)

Respondents: All household members aged 5 years and older

ACTIVITY STATUS DURING THE PAST 7 DAYS (CONTINUED)

ID NUMBER	Under what type of employer did ..[NAME].. work in his/her secondary occupation/economic activity?	What was ..[NAME].. 's employment status in his/her secondary occupation/economic activity?
	1 = Government 2 = State owned enterprise 3 = Cambodian enterprise 4 = Foreign enterprise (private) 5 = Non profit institution 6 = Household sector 7 = Embassies, International institutions and foreign aid and development agencies 8 = Other, specify	1 = Employee 2 = Employer 3 = Own account worker 4 = Unpaid family worker (contributing family worker) 5 = Other, specify....
(1)	(14)	(15)
01		
02		
03		
04		
05		
06		
07		
08		
09		
10		
11		
12		
13		
14		
15		

15. CURRENT ECONOMIC ACTIVITY (CONTINUED)

Respondents: All household members aged 5 years and older

ACTIVITY STATUS DURING THE PAST 7 DAYS (CONTINUED)

ID NUMBER	<p>If Col. 11 = 1 ore more (2 or more jobs/economic activities)</p> <p>How many hours did ..[NAME].. work in his/her secondary occupation/ economic activity during the past 7 days?</p>	<p>How many days did ..[NAME].. work in his/her secondary occupation/ economic activity during the past month?</p>	<p>Does ..[NAME] .. work the whole year in the secondary occupation/economic activity?</p> <p>1 = Yes (>>18a) 2 = No</p>	<p>If Col. 17b = 2</p> <p>Is..[NAME]..'s work the past 7 days in the secondary occupation/economic activity seasonal?</p> <p>Note: Seasonal is work done only part of the year but the same economic activity is reoccurring every year.</p> <p>1 = Yes 2 = No</p>	<p>If Col 11 more than 1 (3 or more jobs/ economic activities)</p> <p>If Col 11 = 1 (>> Col 19)</p> <p>In addition to the hours worked during the past 7 days in main and secondary occupation/economic activity how many additional hours did ..[NAME].. work in the other jobs/activities during the past 7 days?</p> <p>Note: Do not count all hours. Only count the additional hours.</p>	<p>Is any of ..[NAME] ..'s work the past 7 days in the other occupation/economic activities seasonal?</p> <p>Note: Seasonal is work done only part of the year but the same job is reoccurring every year.</p> <p>1 = Yes 2 = No</p>
	HOURS	DAYS			HOURS	
(1)	(16)	(17a)	(17b)	(17c)	(18a)	(18b)
01						
02						
03						
04						
05						
06						
07						
08						
09						
10						
11						
12						
13						
14						
15						

15. CURRENT ECONOMIC ACTIVITY (CONTINUED)

Respondents: All household members aged 5 years and older

ACTIVITY STATUS DURING THE PAST 7 DAYS (CONTINUED)

ID NUMBER	How many hours in total did ..[NAME].. work (main + secondary + additional occupations/ economic activities) during the past 7 days?	Ask only if Employee (Code 1 in Col 8 - main occupation/economic activity or Col 15 - secondary occupation) How much did ..[NAME].. earn in salary/wages during the last month from all economic activities? (In cash or in kind) Write "0" if nothing	Given the total number of hours worked during the past 7 days, would ..[NAME].. like to work less, more or unchanged hours, given that the income would change in a corresponding way? 1 = Less hours 2 = More hours 3 = Unchanged hours (>> NEXT PERSON)	If Col. 21 = 1 How many hours less then (hours) worked the past 7 days (stated in col 19) would .. [NAME] .. like to work? Note: Do not count all hours. Only count the hours..[NAME]..want to reduce or increase ..[NAME]..'s work with.	If Col. 21 = 2 How many hours more then (hours) worked the past 7 days (stated in col 19) would ..[NAME] .. like to work?	If Col 21 = 2 (more hours) If Col 21 = 1 (>> NEXT PERSON) Was ..[NAME].. able to (available to) work more hours (stated in Col 9 or 19) during the past 7 days or start working more hours within 2 weeks from now (the interview)? 1 = Yes 2 = No
	HOURS	RIELS		HOURS MINUS	HOURS EXTRA	
(1)	(19)	(20)	(21)	(22a)	(22b)	(23)
01						
02						
03						
04						
05						
06						
07						
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12						
13						
14						
15						

Note to column 23: The respondent has stated that he/she would like to work more than he/she does today. It is important to know whether the respondent could start work within two weeks from now (only Yes or No). This regardless if there are any jobs available, the respondents personal skills, sickness or else. In the following (column 24) the respondent is asked why he/she doesn't work more than now.

Examples, see next page

15. CURRENT ECONOMIC ACTIVITY (CONTINUED)

Respondents: All household members aged 5 years and older

ACTIVITY STATUS DURING THE PAST 7 DAYS (CONTINUED)

ID NUMBER	If Col 21 = 2 (more hours) Why did.. [NAME].. work less hours the past 7 days than the hours he/she liked to work? 1 = Temporary illness 2 = Not enough work available 3 = Other reasons	If Col 21 = 2 (more hours) and Col 23 = 1 (available to work more hours) If Col 23 = 2 (>> NEXT PERSON) How many months has ..[NAME] .. been working less hours than he/she wanted (hours stated in Col 19) and also been available to work more hours? Number of months. If less than 1 month put '0' Leave it blank if don't know months	If No work during the past 7 days (Col 3 = 2 and Col 4 = 2) If work (Col 3 = 1 or Col 4 = 1 (>> NEXT PERSON)) Has ..[NAME].. been actively seeking work during the past 4 weeks? 1 = Yes 2 = No (>> 31)	In what ways did ..[NAME].. try to find a work? 1 = Applied to advertisement 2 = Contacted (potential) employers 3 = Enquired with friends relatives etc 4 = Employment agency 5 = Tried to start own business but failed 6 = Other (specify)			Was ..[NAME].. available for work during the past 7 days or available to start working within 2 weeks from now (interview)? 1 = Yes 2 = No	How many hours does ..[NAME].. want to work per week? Write '0' if none
				Enter up to 3 codes				
(1)	(24)	(25)	(26)	(27a)	(27b)	(27c)	(28)	(29)
01								
02								
03								
04								
05								
06								
07								
08								
09								
10								
11								
12								
13								
14								
15								

Employed: An employed person who has broken an arm is not able to work within 2 weeks from now. It should be equals to "No" in column 23 and "Illness" in column 24.

An employed construction worker wanting to work more than today and can start working more already tomorrow but there are no employer offering work . It should be equals to "Yes" in column 23 and "Not enough work available" in column 24.

Two more examples on next page

15. CURRENT ECONOMIC ACTIVITY (CONTINUED)

Respondents: All household members aged 5 years and older

ACTIVITY STATUS DURING THE PAST 7 DAYS (CONTINUED)

ID NUMBER	How many months has ..[NAME].. been out of work and actively been looking for work?	<p>If Col 26 = 2 (Not actively seeking work)</p> <p>If Col 26 = 1 (>> NEXT PERSON)</p> <p>Why did [NAME] not actively seek work during the past 4 weeks?</p> <p>1 = Believes no work is available 2 = Awaiting result of application 3 = Waiting to start new job 4 = Permanent disabled 5 = Illness/disease/injured 6 = Too young, too old, retired 7 = Student 8 = Housekeeping, caring for children, elderly or disabled 9 = Other reason, specify....</p>	How many months in total has..[NAME].. been out of work?	<p>If Col 32 < 13 Months</p> <p>Was the latest work ..[NAME].. seasonal?</p> <p>Note: Seasonal is work done only part of the year but the same economic activity is reoccurring every year.</p> <p>1 = Yes 2 = No</p>
	MONTHS	If 6-8 >> NEXT PERSON	MONTHS	
(1)	(30)	(31)	(32)	(33)
01				
02				
03				
04				
05				
06				
07				
08				
09				
10				
11				
12				
13				
14				
15				

Business: A woman wanting to work more in their own shop than today but have to take care of children. It should be equals to "No" in column 23 and "Other reasons" in column 2

Farmer: A farmer harvesting rice to times a year. When harvesting and planting the crops are completed he/she could start working with the neighbours cattle within a week. It should be equals to "Yes" in column 23 and "Not enough work available" in column 24 if not offered job by the neighbour.

17.A. VICTIMIZATION

Respondent: Head of household, spouse of the head of household, or of another adult household member

Q1 Do you feel safe from crime and violence in this neighbourhood? 1 = Yes 2 = No

Q2 Has this household or any of its members been exposed to theft, burglary or robbery in the last 12 months, that is, since ..[MONTH].. last year? 1 = Yes 2 = No

Q3 Has anyone in the household had an accident that caused injury in the last 12 months? 1 = Yes 2 = No

Note: Robbery is the case when one or several offenders are using threat and/or violence when stealing something from you.

VICTIM OF VIOLENCE

Ask each household member individually, for children ask their parents

ID NUMBER	Have you been exposed to any act of violence that caused injury in the last 12 months?	How often have you been exposed in the last 12 months?
	1 = Yes 2 = No (-> NEXT PERSON)	1 = Once 2 = Twice 3 = Three times 4 = 4-9 times 5 = 10 or more times
(1)	(2)	(3)
01		
02		
03		
04		
05		
06		
07		
08		
09		
10		
11		
12		
13		
14		
15		

Note: The purpose of these questions is to gather information on victimizations and feelings of safety in Cambodia. The results are very important when undertaking efforts to reduce victimization and fear and to develop the criminal justice system in Cambodia. The information is strictly confidential and data is only analysed in aggregated tables.

17.B. VICTIMIZATION (CONTINUED)

VICTIM OF VIOLENCE

Ask each household member individually, for children ask their parents

For each person in the household that have been exposed to violence, please provide information from each event.

Write the ID Number in column 1.

ID NUMBER	EVENT NUMBER	To which kind of violence? If more than three events, refer to the three most recent ones. 01 = Push you, shake you, or throw something at you. 02 = Twist your arm. 03 = Punch you with a fist or with something that could hurt you. 04 = Kick you or drag you. 05 = Try to strangle you or burn you. 06 = Attack you with a knife, gun or other type of weapon 07 = Rape, forced to have sexual intercourse when you did not want to 08 = Slap/Strike/Beat you with hand 09 = Slap/Strike/Beat you with object 10 = Rob you 11 = Other (specify	Was the event reported to some authorities? 1 = Yes 2 = No (>> 7)	Which authority did the event get reported to? 1 = Village leader 2 = Police 3 = Other (specify)	Did any event go to court procedure? 1 = Yes 2 = No	Was this act of violence committed by some unknown or by someone known to you? 1 = Unknown person(s) -male 2 = Unknown person(s) - female 3 = Known person (s) - male 4 = Known person (s) - female 5 = Other (specify)	Was the injury so serious that medical care was needed? 1 = Yes 2 = No	How long did it take for the injury to heal? 1 = Less than one week 2 = 1- 2 weeks 3 = 3- 4 weeks 4 = One month or more
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	01							
	02							
	03							
	01							
	02							
	03							
	01							
	02							
	03							
	01							
	02							
	03							