#### PERU LSMS 1994 QUESTIONNAIRE

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#### **Abstract**

This is an English translation of the household questionnaire for the 1994 Peruvian Encuesta de Hogares sobre Medición de Niveles de Vida (ENNIV). The community and price questionnaires have not been translated. The World Bank and Instituto Cuanto were responsible for the collection of the data, but are not responsible for this English translation. The translation has been done by Suhas D. Parandekar of the Department of Economics, Tulane University, New Orleans, Louisiana, USA. Please e-mail any corrections or suggestions regarding the translation of the questionnaire to suhas@mailhost.tcs.tulane.edu, or visit his web site at http://studentweb.tulane.edu/~suhas. It is suggested that this translation be used concurrently with the Spanish versions of the questionnaire, the codebook and the dictionary of variables in order to be sure that users have all the information they need on skip patterns and special codes. In addition to the English translation, this document also provides the names of the relevant data sets and the names of the variables as they have been given in the data sets made publicly available by the World Bank. The typesetting convention that has been adopted is to have questions in boldface type, codes in UPPERCASE, and variable names in BOLDFACE UPPERCASE and within square brackets.

Instituto Cuanto The World Bank

**National Survey of Households** 

Living Standards Measurement May - July 1994

#### **Identification of the Selected Dwelling**

DATASET: REG01

#### A. Geographical Location

- 1. State [**A01** \$ ]
- 2. Province [A02 \$]
- 3. District [A03 \$]
- 4. Name [**A04** \$]
- 5. Category of Population Center [A05 \$]

#### **B.** Sample Classification

- 1. Rural or Urban [A06 \$]
- 2. Segment [SEGMENTO]
- 3. Dwelling Number [VIVIENDA]
- 4. Household Number [HOGAR]
- C. Address [A08 \$ to A15 \$]
- D. Whether Included in 1991 Sample [A16 \$]

#### E. Investigator

- 1. Name
- 2. Day and Month [A17 \$ and A18 \$]
- 3. Comments
- 4. Result Whether Completed or Incomplete [A19 \$]
- 5. Reasons for Not being Completed

#### F. Supervisor

- 1. Name
- 2. Dates of Supervision
- 3. Comments

In addition to the variables mentioned in this document, each of the portable SAS datasets also contains 7 classification variables. These variables are [ \_CASENUM, \_DATE \$, \_WEIGHT, RECTYPE, SEGMENTO, VIVIENDA, HOGAR]. All variables are numeric, except for alphanumeric variables denoted by a \$ symbol.

#### 1. Household Roster

DATASET: REG02

# Q1. A complete list of all persons who usually live in the household and eat food at this household.

#### 1a. Code Number of Person [B00]

#### 1c. Relation with the Head of Household [B01]

- 1. HEAD OF THE HOUSEHOLD
- 2. SPOUSE OR COMPANION OF THE HEAD
- 3. OFFSPRING OF HEAD
- 4. SON OR DAUGHTER-IN-LAW
- 5. GRANDCHILD
- 6. PARENTS OR PARENTS-IN-LAW OF HEAD
- 7. OTHER RELATIVES
- 8. DOMESTIC WORKER
- 9. PENSIONER (PAYING GUEST?)
- 10. OTHER NON-RELATIVE
- 2. Sex of Person [B02]
- 1. MALE 2. FEMALE
- 3. Age of Person [B03]
- 4. Date of Birth [B04D BO4M BO4A]

#### 5. Marital Status (If older than 12 Years) [B05]

- 1. COMMON LAW
- 2. MARRIED
- 3. WIDOWED
- 4. DIVORCED
- 5. SEPARATED
- 6. SINGLE

#### 6. Mother Tongue Spoken [B06]

- 1. SPANISH
- 2. OUECHUA
- 3. AYMARA
- 4. CAMPA
- 5. SHIPIBO
- 6. OTHER INDIGENOUS
- 7. ENGLISH
- 8. OTHER FOREIGN
- 9. DO NOT SPEAK

- 7. Other Language or Dialect Spoken [B07]
- 1. SPANISH
- 2. QUECHUA
- 3. AYMARA
- 4. CAMPA
- 5. SHIPIBO
- 6. OTHER INDIGENOUS
- 7. ENGLISH
- 8. GERMAN
- 9. FRENCH
- 10. OTHER FOREIGN LANGUAGE
- 11. NO OTHER LANGUAGE
- 8. Number of Months absent during the last 12 months [B08]
- 9. Whether Member of Household or Not (1. YES 2. NO) [B09]
- 10. Code Number of Mother of Person (99. MOTHER NOT IN HOUSEHOLD) [B10]
- 11. Whether was Interviewed in 1991 (1. YES 2. NO) [B11]
- 12. Whether Respondent considers himself or herself to be worse off or better off as compared to October 1991. [B12]
- 1. LIVING STANDARD IMPROVED
- 2. LIVING STANDARD WORSENED
- 3. LIVING STANDARD UNCHANGED

# 2A. Characteristics of the Dwelling

DATASET: REG03

#### 1. Type of House [C01]

- 1. INDEPENDENT HOUSE
- 2. APARTMENT
- 3. COTTAGE
- 4. TENEMENT HOUSE
- 5. IMPROVISED HOUSING
- 6. OTHER (SPECIFY)
- 2. Material of Walls [C02]
- 1. BRICK OR CONCRETE
- 2. ADOBE OR MUD
- 3. CANE AND MUD
- 4. STONE AND MUD
- 5. WOOD
- 6. MATTING
- 7. OTHER (SPECIFY)
- 3. Material of Floor [C03]
- 1. PARQUET OR POLISHED WOOD
- 2. LAMINATED MATERIAL
- 3. STONE TILES
- 4. PLAIN WOOD
- 5. CEMENT
- 6. DIRT
- 7. OTHER (SPECIFY)
- 4. Material of Roof [C04]
- 1. REINFORCED CONCRETE
- 2. WOOD
- 3. ROOF TILES
- 4. TOUGH CANVAS
- 5. CANE OR MATTING AND MUD
- 6. STRAW
- 7. OTHER (SPECIFY)
- **5.** Total Number of Rooms (Excluding bathrooms, kitchen, corridors, garage, storage spaces) [C05]
- 6. Exists a Kitchen 1. YES 2. NO [C06]
- 7. Exists a room for Home Business 1. YES 2. NO [C07]
- 8. Made Home Improvement in Past 3 Months 1. YES 2. NO [C08]

#### **Type of Home Improvement Carried Out**

- 1. CONSTRUCTED OR REPAIRED WALL [C08A]
- 2. PAINTED INTERIOR OR EXTERIOR WALLS [C08B]
- 3. INSTALLED WATER CONNECTION [C08C]
- 4. INSTALLED SEWAGE CONNECTION [C08D]
- 5. INSTALLED ELECTRICITY CONNECTION [C08E]
- 6. INSTALLED HOT WATER SYSTEM [C08F]
- 7. INSTALLED OR REPAIRED SANITARY FITTINGS [C08G]
- 8. INSTALLED AIR-CONDITIONING [C08H]
- 9. OTHER IMPROVEMENTS [C08I]

# 2B. Expenditures Related to the Dwelling

**DATASET: REG04** 

- 1. Ownership Status of Dwelling [D01]
- 1. SQUATTERS
- 2. OWNED, TOTALLY PAID FOR
- 3. OWNED, PAYING INSTALMENTS
- 4. RENTED IN EXCHANGE FOR IN-KIND, SERVICES OR MONEY
- 5. LEGALLY OCCUPIED
- 6. OTHER (SPECIFY)
- 2. If instalments, last amount and month paid

AMOUNT (IN DOLLARS) OR (IN SOLES) AND MONTH [D02A, D02B, D02C]

- 3. Frequency of Payment of Instalments [D03]
- 1. MONTHLY
- 2. QUARTERLY
- 3. HALF-YEARLY
- 4. YEARLY
- 4. What was the last montly payment and in what month?

AMOUNT (IN DOLLARS) OR (IN SOLES) AND MONTH [D04A, D04B, D04C]

IF NOT PAID IN CASH, DETERMINE VALUE OF SERVICES OR IN-KIND

- 5. If rented, from whom rented [D05]
- 1. RELATIVE
- 2. PUBLIC ORGANIZATION
- 3. PRIVATE ORGANIZATION
- 4. EMPLOYER
- 5. OTHER (SPECIFY)
- 6. If you had to rent, estimated rental value in Soles per Month [D06]
- 7. Estimated Sale Value of Dwelling, in Soles [D07A, D07B]
- 8. Source of Water Supply [D08]
- 1. INSIDE THE HOUSE
- 2. OUTSIDE THE HOUSE, BUT INSIDE THE COMPOUND.
- 3. PUMP
- 4. WELL
- 5. RIVER OR STREAM
- 6. WATER TANK OR SELLER
- 7. OTHER
- 9. Average number of hours per day of Public Water Service over the past 15 days [D09]
- 10. Last monthly payment for water and in which month [D10A, D10B]
- 11. Metres from Source of Water [D11]
- 12. Time taken to bring water from outside source (minutes) [D12]
- 13. Believes that water is contaminated 1. YES 2. NO [D13]

#### 14. Secondary Source of water (if exists) [D14]

CODES AS IN 8 ABOVE.

#### 15. Sanitation Facilities [D15]

- 1. PUBLIC NETWORK CONNECTION INSIDE HOUSE
- 2. PUBLIC NETWORK CONNECTION OUTSIDE HOUSE
- 3. SEPTIC TANK
- 4. PIT LATRINE
- 5. SEWER OR CANAL
- 6. NO SANITATION FACILITIES

#### 16. Source of Illumination [D16]

- 1. ELECTRICITY
- 2. KEROSENE, PETROL OR GAS
- 3. CANDLE
- 4. NONE
- 5. OTHER (SPECIFY)
- 17. Last monthly payment for light and in which month [D17A, D17B]

#### 18. Source of Energy for Cooking [D18]

- 1. ELECTRICTY
- 2. GAS
- 3. KEROSENE
- 4. COAL
- 5. FIREWOOD
- 6. OTHER
- 7. DO NOT COOK
- 19. Expenditure for Energy in Past 4 Weeks and month [D19A, D19B]
- **20.** Telephone Connection 1. YES 2. NO [D20]
- 21. Last monthly payment for telephone and month [D21A, D21B]
- 22. Last montly payment for municipal services and month [D22A, D22B]
- 23. Lat monthly payment for other regular expenditures, for example, maintenance, police, and in which month [D23A, D23B]

# 3. Education of each person 6 Years and Older

**DATASET: REG05** 

- 0. Code Number of Person [E00]
- 1. Can read a Newspaper 1. YES 2. NO [E01]
- 2. Can write a letter 1. YES 2. NO [E02]
- 3. Ever been in School 1. YES 2. NO [E03]
- **4. Check Age** 1. 14 OR OLDER 2. LESS THAN 14 [E04]
- 5. Highest Educational Attainment [E05A]
- 1. NONE (GO TO 9 IF AGE 14 OR YOUNGER, ELSE GO TO 24)
- 2. PRIMARY (GO TO 7)
- 3. SECONDARY (COMMON) (GO TO 7)
- 4. SECONDARY (TECHNICAL)
- 5. TERTIARY BUT NOT UNIVERSITY
- 6. UNIVERSITY
- 7. OTHER

#### NUMBER OF YEARS WITHIN LEVEL [E05B]

- 6. Whether Obtained Degree at Highest Level Attained [E06]
- 1. YES 2. NO
- 7. Type of School [E07]
- 1. PUBLIC 2. PRIVATE 3. PAROCHIAL
- 8. Water and Sanitation Facilities at Last School [E08]
- 1. PUBLIC NETWORK WATER SUPPLY
- 2. SEWER CONNECTION
- 3. BOTH
- 4. NONE
- 9. Currently attending an Educational Institution [E09]
- 1. YES 2. NO
- 10. In the past 7 days, how many hours of classes attended in all [E10]
- 11. In the past 12 months, attended some educational centre or studied in an institution [E11]
- 1. YES
- 2. NO (IF AGE 20 YEARS OR OLDER GO TO 24, ELSE GO TO 21)
- 12. In which month enrolled [E12]

- 0. Code Number of Person [F00]
- 13A. Enrollment and other charges in Last Year [F13A]
- 13B. Expenditures on Books and Textbooks Last Year [F13B]
- 13C. Expenditures on Uniforms and other Supplies [F13C]
- 13D. Total Expenditure on A, B, and C [F13D]
- 14. Expenditure Last month on Lunch, Transportation, etc. [F14]
- 15a. Number of Books Assigned by the school [F15A]

#### 15b. Number of Books Actually Bought [F15B]

#### 16. Action taken if all assigned books not bought [F16]

- 1. SHARED WITH OTHER HOUSEHOLD MEMBERS
- 2. SHARED WITH OTHER NON-HOUSEHOLD MEMBERS
- 3. USED LIBRARY
- 4. BORROWED BOOKS
- 5. OTHER
- 6. NO ACCESS TO BOOKS

#### 17. Whether received any free supplies [F17]

- 1. UNIFORMS
- 2. BOOKS
- 3. SUPPLIES
- 4. OTHER(SPECIFY)
- 5. NONE

#### 18. Whether transferred or left school in last year [F18]

#### **TRANSFERRED**

- 1. PRIVATE TO PUBLIC
- 2. PUBLIC TO PRIVATE
- 3. PUBLIC TO PUBLIC
- 4. PRIVATE TO PRIVATE

LEFT SCHOOL reasons why

- 5. INCREASED EXPENDITURES
- 6. TO WORK
- 7. FAMILY PROBLEMS
- 8. LOW QUALITY EDUCATION
- 9. OTHER
- 0. NEITHER TRANSFERRED NOR LEFT

#### 19. Usual means of transport to school [F19]

- 1. PUBLIC TRANSPORT
- 2. MOTORIZED PRIVATE TRANSPORT
- 3. NON-MOTORIZED PRIVATE TRANSPORT
- 4. WALKING
- 5. BY MULE
- 6. OTHER

#### 20. Time taken to reach school HOURS AND MINUTES [F20A, F20B]

#### 21. Whether Repeated any Year in School [F21]

0. NO

NUMBER OF YEARS REPEATED

#### 22. If Age 14 Years or Younger, Which Grade Repeated [F22A - F22F]

- 1. PRIMARY GRADE 1
- 2. PRIMARY GRADE 2
- 3. PRIMARY GRADE 3
- 4. PRIMARY GRADE 4
- 5. PRIMARY GRADE 5
- 6. PRIMARY GRADE 6
- 7. SECONDARY YEAR 1
- 8. SECONDARY YEAR 2
- 9. SECONDARY YEAR 3
- 10. SECONDARY YEAR 4
- 11. SECONDARY YEAR 5

DATASET: REG07

#### 0. Code Number of Person [G00]

#### 23. If Age 14 Years or Younger, Reason for repeating grade [G23]

- 1. BEING ABSENT DUE TO POOR HEALTH
- 2. WORK
- 3. WORK AT HOME
- 4. POOR QUALITY OF EDUCATION
- 5. TEACHER INCOMPETENT
- 6. LACK OF BOOKS, SUPPLIES, ETC.
- 7. CHILD UNWILLING
- **8. PARENTS NOT INTERESTED**
- 9. LANGUAGE PROBLEM
- 10. OTHER (SPECIFY)

#### 24. Ever enrolled in training course for work or profession[G24]

- 1. YES, RIGHT NOW
- 2. YES, IN THE PAST
- 3. NEVER

#### 25. If enrolled now, how many hours a week [G25]

#### 26. Source of Training [G26]

- 1. ACADEMY
- 2. OCCUPATIONAL TRAINING INSTITUTE
- 3. HIGHER TECHNOLOGICAL INSTITUTE
- 4. UNIVERSITY TRAINING
- 5. ARMY TRAINING CENTRE
- 6. PLACE OF WORK OR BUSINESS
- 7. CORRESPONDENCE COURSE
- 8. OTHER (SPECIFY)

#### 27. Whether Obtained a diploma or certificate for course [G27]

- 1. YES
- 2. NO

#### 28. If Age 6 Years or Younger - whether attending Preschool [G28]

- 1. ATTENDING PRONOEI
- 2. ATTENDING ESTATAL
- 3. ATTENDING PRIVATE FACILITY
- 4. ATTENDING OTHER
- 5. NO, (CHILD IS) TOO SMALL
- 6. NO, TOO EXPENSIVE
- 7. NO. FACILITY DOES NOT EXIST
- 8. NO, IT IS NOT NECESSARY
- 29. Month when enrolled in Preschool [G29]
- 30. Expenditure on Enrollment and Related Fees in Preschool [G30]
- 31. Expenditure last month on Snacks, Transportation, etc, in

#### Preschool [G31]

**32.** If household has children of school going age (or has children attending school); CODE NUMBER OF PERSON PROVIDING ANSWER [G32]

#### Type of changes in school considered desirable;

- 1. IMPROVE THE LOCATION [G32A]
- 2. IMPROVE SCHOOL FURNISHINGS AND PHYSICAL PLANT [G32B]
- 3. IMPLEMENT A FOOD PROGRAM [G32C]
- 4. REDUCE NUMBER OF STUDENT IN THE CLASSROOM- [G32D]
- 5. PROVIDE TRAINING TO TEACHERS [G32E]
- 6. IMPROVE DIDACTIC MATERIALS [G32F]
- 7. IMPROVE THE LIBRARY [G32G]
- 8. GIVE MORE AUTHORITY TO THE PRINCIPAL [G32H]
- 9. IMPROVE AUXILLARY OR SUPPORT SERVICES [G32I]
- 10. OTHER IMPROVEMENT [G32J]

#### 33. Opinion about who should manage public schools [G33]

- 1. MINISTRY OF EDUCATION
- 2. MUNICIPALITY
- 3. COMMUNITY (SUCH AS PARENTS' ASSOCIATIONS)
- 4. RELIGIOUS INSTITUTION
- 5. TEACHERS (WHO HAVE AUTONOMY)
- 6. A PRIVATE ENTERPRISE (BUSINESS)
- 7. OTHER

### 4A. Health - For All Members of the Household

DATASET: REG08

#### 0. Code Number of Person [H00]

# 1. In the past 4 weeks, was person sick, injured in an accident or exhibited symptoms of illness [H01]

- 1. DIARRHEA
- 2. COLD, RESPIRATORY ILLNESS
- 3. WORMS
- 4. FEVER, RASH, RED EYES
- 5. PROLONGED COUGH LEADING TO VOMITING
- 6. PERSISTENT COUGH WITH BLOOD IN SPUTUM. LOOSING WEIGHT
- 7. ITCHING RASH
- 8. HIGH FEVER, UPSET STOMACH, GENERAL MALAISE
- 9. MALARIAL FEVER
- 10. OTHER DIAGNOSIS (SPECIFY)
- 11. ACCIDENT
- 12. NONE

#### 2. Whether incurred health related expenditure in past 4 weeks [H02]

- 1. CONSULTATION CHARGES
- 2. FAMILY PLANNING
- 3. MEDICINE
- 4. CONTRACEPTIVES
- 5. NONE
- 3. Number of days sick in past 4 weeks [H03]
- 4. Of sick-days, number of days bed-ridden in past 4 weeks [H04]
- 5. Which type of health care provider consulted in past 4 weeks [H05]
- 1. MEDICAL DOCTOR
- 2. DENTIST
- 3. OBSTETRICIAN
- 4. NURSE
- 5. HEALTH OFFICER
- 6. HEALTH EXTENSION WORKER
- 7. PHARMACIST
- 8. MIDWIFE
- 9. NATIVE HEALER
- 10. OTHER (SPECIFY)
- 11. NO

#### 6. Place of Consultation [H06]

- 1. HOSPITAL OF MINISTRY OF HEALTH
- 2. HOSPITAL, IPSS
- 3. HOSPITAL, FF.AA
- 4. HEALTH CENTER
- 5. SANITARY POST
- 6. COMMUNITY HEALTH POST
- 7. CLINIC
- 8. PHARMACY
- 9. HOME OF DOCTOR
- 10. INFIRMARY
- 11. OTHER

#### 7. Mode of Transportation to place of consultation [H07]

- 1. PUBLIC TRANSPORT
- 2. PRIVATE MOTORIZED TRANSPORT
- 3. PRIVATE NON-MOTORIZED TRANSPORT
- 4. WALKING
- 5. BY MULE
- 6. OTHER
- 8. Time to reach place of consultation HOURS AND MINUTES [H08A, H08B]
- 9. Waiting Time at place of consultation

HOURS AND MINUTES [H09A, H09B]

- 0. Code Number of Person [H00A]
- 10. Number of Consultations in Past 4 Weeks [H10]
- 11. Total Expenditure for all consultations in past 4 weeks [H11]
- 12. Number of Nights Hospitalized in Past 4 weeks [H12]
- 13. Place of Hospitalization [H13]
- 1. HOSPITAL OF MINISTRY OF HEALTH
- 2. HOSPITAL, IPSS
- 3. HOSPITAL, FF.AA AND FF.PP.
- 4. HEALTH CENTER
- 5. MATERNITY CLINIC
- 6. OTHER
- 14. Total Expenditure for Hospitalization [H14]

#### 15. Whether Bought or Received Medicine in past 4 weeks [H15]

- 1. BOUGHT MEDICINE
- 2. RECEIVED MEDICINE
- 3. BOTH BOUGHT AND RECEIVED MEDICINE
- 4. NEITHER BOUGHT NOR RECEIVED MEDICINE

#### 16. Place where obtained Medicine [H16]

- 1. PHARMACY
- 2. MEDICAL SHOP
- 3. I.P.S.S.
- 4. GROCERY STORE
- 5. PARISH STORE "PARROQUIA"
- 6. HOSPITAL OR HEALTH CENTRE
- 7. OTHER
- 17. Total Expenditure on Medicines [H17]

#### 18. Provider of Health Insurance [H18]

- 1. I.P.S.S.
- 2. PRIVATE PROVIDER
- 3. MILITARY
- 4. I.P.S.S. AND "PART."
- 5. NOT INSURED

#### 19A. If Age 6 Years or Younger, received vaccine BCG [H19a]

1. YES 2. NO

#### 19B. If Age 6 Years or Younger, received vaccine Measles [H19B]

1. YES 2. NO

#### 19C. If Age 6 Years or Younger, received vaccine Polio [H19C]

IF YES, NUMBER OF DOSES 0. NO

#### 19D. If Age 6 Years or Younger, received vaccine DPT [H19D]

IF YES, NUMBER OF DOSES 0. NO

#### 4B. Health - For Women 15 to 45 Years Old

DATASET: REG09

- 0. Code Number of Person [100]
- 1. Ever Been Pregnant

IF YES, NUMBER OF TIMES [101]

- 0. NO GO TO Q 7.
- 2. Number of Live Births(Boys and Girls) [I02A, I02B]

NONE - GO TO Q. 7.

- 3. Number of Surviving Children(Boys and Girls) [I03A, I03B]
- 4. Age of Woman at time of first birth [I04]
- 5. Any Child Age 5 Years or Younger died in Past 5 Years ? [105]

IF YES, NUMBER OF DEATHS

- 0. NO GO TO Q 7.
- 6. Year and Month of Death and Age of Last Child [I06AA, I06AM]

Year and Month of Death and Age of Second Last Child [106CA, 106CM]

7. Whether Currently Pregnant [I07]

IF YES, NUMBER OF MONTHS

- 0. NO GO TO O 11.
- 8. Number of Pre-natal Check-Ups [I08]
- 9. Term (Months) of Pregnancy at time of first check-up [109]
- 10. Place where obtained Check-Up [I10]
- 1. HOSPITAL
- 2. HEALTH CENTRE
- 3. SANITARY POST
- 4. COMMUNITY POST
- 5. CLINIC
- 6. MIDWIFE
- 7. OTHER
- 11. Received Tetanus Vaccine in Past 5 Years [I11]
- 1. YES 2. NO
- 12. Total Number of Tetanus Vaccines ever Received [I12]
- 13. Whether Use any Contraceptive Technique [I13]

1. PILL 7 RHYTHM METHOD 2. I.U.D. 8 MOCO CERVICO (?)

3. INJECTION 9. TEMPERATURE METHOD

4. DIAPHRAGM 10. WITHDRAWAL

5. CONDOM 11. DO NOT USE ANY METHOD

6. STERILIZATION 12. DO NOT KNOW OF ANY METHOD

## 5A. Economic Activity of Those 6 Years and Older

- 0. Code Number of Person [K00]
- 1. Did person work for a non-household member (ex. business, society, government, patron, etc.) in the past 7 days? [K01]
- 1. YES 2. NO
- 2. Did person work for a non-household member in the past 12 months? [K02]
- 1. YES 2. NO
- 3. Whether performed any work in the past 7 days on own business or farm [K03]
- 1. YES 2. NO
- 4. Whether performed any work in the past 12 months on own business or farm [K04]
- 1. YES 2. NO
- 5. Number of days and hours per day performed household work in the past 7 days ? [K05A, K05B]
- 0. NO HOUSEHOLD WORK PERFORMED
- 6. Interviewer Coded after examining Responses to 1 and 3 [K06]
- 1. AT LEAST ONE POSITIVE ANSWER GO TO NEXT SECTION
- 2. NO POSITIVE ANSWER AT ALL CONTINUE
- 7. Did you look for work in the Past 7 days [K07]
- 1. YES
- 2. NO
- 8. Number of Weeks been looking for Work [K08]
- 9. Amount and Unit of time of "Reservation Wage" [K09, K09C]
- 10. Reason for Not looking for work [K10]
- 1. STUDYING OR TOO YOUNG
- 2. HAS TO DO HOUSEHOLD WORK
- 3. RETIRED
- 4. LIVES OFF RENT
- 5. INVALID/AGED
- 6. WAITING TO RETURN TO PREVIOUS JOB
- 7. WAITING TO JOIN NEW JOB
- 8. IS ON VACATION OR LEAVE
- 9. IS SICK
- 10. ON STRIKE OR WORK SUSPENSION
- 11. WAITING FOR HARVEST OR OTHER SEASONAL WORK
- 12. THERE IS NO WORK TO BE FOUND
- 13. OTHER
- 11. Whether has Permanent Job even though did not work in past 7 days. [K11]
- 1. YES GO TO PART 5D. 2. NO
- 12. Interviewer Coded after examining Responses to 2 and 4 [K12]
- 1. AT LEAST ONE POSITIVE ANSWER GO TO PART 5E
- 2. NO POSITIVE ANSWER AT ALL GO TO PART 5G

# 5B. Principal Economic Activity in Past 7 Days

DATASET: REG12

Principal Economic Activity defined as activity in which spent Most Hours (NOT earned most income)

- 0. Code Number of Person [L00]
- 1. Description and Code of Occupation [L01A]
- 2. Description and Code of Establishment [L02]
- 3. Number of Days Worked in Job in last 7 days [L03]
- 4. Number of Hours Worked per Day [L04]
- 5. Number of Months worked in Past 12 Months [L05]
- 6. If worked less than 8 months, is the work of a type that can only be done during certain periods of the year [L06]
- 1. YES
- 2. NO
- 7. Tenure in the current job and Units (Years, Months, or Weeks)

[L07A, L07B, L07C]

- 8a. Amount of last Payment [L08A]
- 8b. Frequency of Payment [L08B]
- 8c. Month of Last Payment [L08C]
- 9. Do you work for yourself or as an unpaid family worker [L09]
- 1. SELF
- 2. UNPAID FAMILY WORKER- GO TO Q. 22
- 3. NO

**DATASET: REG13.SSP** 

- 0. Code Number of Person [M00]
- 10. Whether Received any Monetary Payment in addition to Wage [M10A,M10B,M10C]
- 1. YES, AMOUNT and UNIT (OF TIME)
- 2. NO
- 11. Whether Received any Payment in Kind, For example, food or transportation [M11A, M11B, M11C]
- 1. YES, MONEY VALUE OF PAYMENT and UNIT (OF TIME)
- 2. NO
- 12. Whether Received any Additional Payment in Kind, For example, clothes or Uniform or Housing [M12A, M12B, M12C]
- 1. YES, MONEY VALUE OF PAYMENT and UNIT (OF TIME)
- 2. NO

#### 13. Whether Public or Private Sector [M13]

- 1. PUBLIC SECTOR WORKER
- 2. PRIVATE SECTOR WORKER
- 3. PUBLIC SECTOR EMPLOYEE
- 4. PRIVATE SECTOR EMPLOYEE
- 5. HOUSEHOLD WORKER

#### 14. Whether Employer is Related to you 1. YES 2. NO [M14]

#### 15. Whether there is any Union at the Establishment where you work [M15]

- 1. YES
- 2. NO

#### 16. Whether Signed any Contract when Began to Work [M16]

- 1. YES
- 2. NO

#### 17. Usual Means of Transport to Place of Work [M17]

- 1. PUBLIC TRANSPORT
- 2. PRIVATE MOTORIZED TRANSPORT
- 3. PRIVATE NON-MOTORIZED TRANSPORT
- 4. WALKING
- 5. BY MULE
- 6. NONE
- 7. OTHER

DATASET: REG14.SSP

#### 0. Code Number of Person [N00]

#### 18. Time taken to Reach Place of Work [N18A, N18B]

HOURS AND MINUTES

#### 19. Distance to Place of Work in Kilometres [N19]

#### 20. Whether Own Tools or Equipment to Perform Work [N20]

MARKET VALUE OF TOOLS OWNED (0 IF NONE)

#### 21. Whether get any form of Paid Leave [N21]

- 1. VACATION
- 2. SICK LEAVE
- 3. BOTH
- 4. NO TYPE OF PAID LEAVE

# 22. Whether is Insured with I.P.S.S. (Peruvian Social Security Institute) or other Medical Insurance Provider [N22]

- 1. I.P.S.S.
- 2. PRIVATE PROVIDER
- 3. MILITARY OR POLICE
- 4. I.P.S.S AND PRIVATE
- 5. NOT INSURED

#### 23. Whether is member of any Pension Scheme [N23]

- 1. I.P.S.S.
- 2. A.F.P.
- 3. MILITARY OR POLICE
- 4. OTHER
- 5. NONE

#### 24. Number of Employees in Establishment where worked [N24]

- 1. SOLE WORKER
- 2.2 TO 5
- 3.6 TO 10
- 4.11 TO 20
- 5. 21 TO 50
- 6.51 TO 100
- 7. 101 TO 200
- 8. 201 OR MORE

#### 25. Does respondent believe Establishment Pollutes [N25]

- 1. AIR
- 2. WATER
- 3. SOIL OR GROUND
- 4. DOES NOT POLLUTE
- 5. DOES NOT KNOW WHETHER POLLUTES

#### 26. Whether your occupation is harmful to your Health [N26]

- 1. YES
- 2. NO

#### 27. Whether had Secondary Occupation in Past 7 days [N27]

- 1. YES GO TO NEXT SECTION
- 2. NO GO TO PART 5D

# 5C. Secondary Economic Activity in Past 7 Days

**DATASET: REG15** 

- 0. Code Number of Person [O00]
- 1. Description and Code of Secondary Occupation at which most hours were spent in last 7 days [O01]
- 2. Description and Code of Establishment [O02]
- 3. Number of Days Worked in Job [O03]
- 4. Number of Hours Worked per Day [O04]
- 5. Number of Months worked in Past 12 Months [O05]
- 6. Tenure in the current secondary job and Units (Years, Months, or Weeks) [O06A, O06B, O06C]
- 7a. Amount of last Payment [O07A]
- 7b. Frequency of Payment [O07B]
- 7c. Month of Last Payment [O07C]
- 8. Did you work for yourself or as an unpaid family worker [O08]
- 1. SELF
- 2. UNPAID FAMILY WORKER GO TO Q. 17
- 3. NO

- 0. Code Number of Person [P00]
- 9. Whether Received any Monetary Payment in addition to Wage
- 1. YES, AMOUNT and UNIT (OF TIME) [P09A,P09B,P09C]
- 2. NO
- 10. Whether Received any Payment in Kind, For example, food or transportation [P10A, P10B, P10C]
- 1. YES, MONEY VALUE OF PAYMENT and UNIT (OF TIME)
- 2. NO
- 11. Whether Received any Additional Payment in Kind, For example, clothes or Uniform or House [P11A, P11B, P11C]
- 1. YES, MONEY VALUE OF PAYMENT and UNIT (OF TIME)
- 2. NO
- 12. Whether Public or Private Sector [P12]
- 1. PUBLIC SECTOR WORKER
- 2. PRIVATE SECTOR WORKER
- 3. PUBLIC SECTOR EMPLOYEE
- 4. PRIVATE SECTOR EMPLOYEE
- 5. HOUSEHOLD WORKER
- 13. Whether there is any Union at the Establishment where you work [P13]
- 1. YES
- 2. NO

#### 14. Whether Signed any Contract when Began to Work [P14]

- 1. YES
- 2. NO

**DATASET: REG17** 

#### 0. Code Number of Person [Q00]

#### 15. Whether Own Tools or Equipment to Perform Work [Q15]

MARKET VALUE OF TOOLS OWNED (0 IF NONE)

#### 16. Whether get any form of Paid Leave [Q16]

- 1. VACATION
- 2. SICK LEAVE
- 3. BOTH
- 4. NO TYPE OF PAID LEAVE

# 17. Whether is Insured with I.P.S.S. (Peruvian Social Security Institute) or other Medical Insurance Provider [Q17]

- 1. I.P.S.S.
- 2. PRIVATE PROVIDER
- 3. MILITARY OR POLICE
- 4. I.P.S.S AND PRIVATE
- 5. NOT INSURED

#### 18. Whether is member of any Pension Scheme [Q18]

- 1. I.P.S.S.
- 2. A.F.P.
- 3. MILITARY OR POLICE
- 4. OTHER
- 5. NONE

#### 19. Number of Employees in Establishment of Secondary Job [Q19]

- 1. SOLE WORKER
- 2.2 TO 5
- 3.6 TO 10
- 4. 11 TO 20
- 5. 21 TO 50
- 6.51 TO 100
- 7. 101 TO 200
- 8. 201 OR MORE

#### 20. Whether had Additional Occupation in Past 7 days [Q20A, Q20B, Q20C]

- 1. YES AMOUNT EARNED IN ALL OTHER JOBS AND UNITS (OF TIME)
- 2. NO GO TO PART 5D

## 5D. Job Search Activity

DATASET: REG18

#### 0. Code Number of Person [R00]

- 1. In past 7 days, whether looked for job which would pay more than your current income  $\lceil R01 \rceil$
- 1. YES
- 2. NO
- 2. Reason for Not looking for a Job [R02]
- 1. DOES NOT WISH TO WORK
- 2. DOES NOT HAVE TIME
- 3. EARNS ENOUGH
- 4. WAITING FOR A RESPONSE TO APPLICATION
- 5. WAITING TO BEGIN A NEW JOB
- 6. NO WORK TO BE FOUND
- 7. IS GOING TO LOOK
- 8. OTHER (SPECIFY)
- 3. In past 7 days, whether looked for a change of jobs [R03]
- 1. YES
- 2. NO GO TO PART E
- 4. Number of Weeks been looking for a job [R04]
- 5. Type of Job looked for [R05]
- 1. INDEPENDENT JOB
- 2. SALARIED EMPLOYMENT
- 3. BOTH
- 6. Sector in which looked for job [R06]
- 1. PRIVATE
- 2. PUBLIC
- 3. BOTH
- 7. Whether looking for Agricultural job [R07]
- 1. AGRICULTURAL 2. NON AGRICULTURAL
- 3. BOTH
- 8. Reservation wage Amount and units (of time) [R08A, R08B]

# 5E. Principal Economic Activity in Past 12 Months

DATASET: REG19

#### 0. Code Number of Person [S00]

- 1. Description and Code of Occupation in past 12 months [S01]
- 1. IF NOT WORKED IN PAST 7 DAYS, GO TO Q. 2
- 2. SAME AS PRINCIPAL OCCUPATION OF LAST 7 DAYS GO TO O. 28
- 3. SAME AS SECONDARY OCCUPATION OF LAST 7 DAYS GO TO Q. 28
- 4. DIFFERENT FROM OCCUPATION IN LAST 7 DAYS
- 2. Description and Code of Occupation in Past 12 months [S02]
- 3. Description and Code of Establishment of Past 12 months [S03]
- 4. Number of Months worked in Past 12 Months [S04]
- 5. If worked less than 8 months, is the work of a type that can only be done during certain times of the year [S05]
- 1. YES
- 2. NO
- 6. Number of Days per Week usually worked in Past 12 Months [S06]
- 7. Number of Hours per Day usually worked in Past 12 Months [S07]
- 8. Tenure in the current job and Units (Years, Months, or Weeks) [S08A, S08B, S08C]
- 9a. Amount of last Payment [S09A]
- 9b. Frequency of Payment [S09B]
- 9c. Month of Last Payment [S09C]

DATASET: REG20

#### 0. Code Number of Person [T00]

#### 10. Did you work for yourself or as an unpaid family worker? [T10]

- 1. SELF
- 2. UNPAID FAMILY WORKER GO TO Q. 23
- 3 NO

# 11. Whether Received any Monetary Payment in addition to Wage [T11A, T11B, T11C]

- 1. YES, AMOUNT and UNIT (OF TIME)
- 2. NO

# 12. Whether Received any Payment in Kind, For example, food or transportation [T12A, T12B, T12C]

- 1. YES, MONEY VALUE OF PAYMENT and UNIT (OF TIME)
- 2. NO

# 13. Whether Received any Additional Payment in Kind, For example, clothes or Uniform or House [T13A, T13B, T13C]

- 1. YES, MONEY VALUE OF PAYMENT and UNIT (OF TIME)
- 2. NO

#### 14. Whether Public or Private Sector [T14]

- 1. PUBLIC SECTOR WORKER
- 2. PRIVATE SECTOR WORKER
- 3. PUBLIC SECTOR EMPLOYEE
- 4. PRIVATE SECTOR EMPLOYEE
- 5. HOUSEHOLD WORKER

#### 15. Whether Employer is Related to you [T15]

1. YES 2. NO

#### 16. Whether there is any Union at the Establishment where you work [T16]

- 1. YES
- 2. NO

#### 17. Whether Signed any Contract when Began to Work [T17]

- 1. YES
- 2. NO

DATASET: REG21

#### 0. Code Number of Person [U00]

#### 18. Usual Means of Transport to Place of Work [U18]

- 1. PUBLIC TRANSPORT
- 2. PRIVATE MOTORIZED TRANSPORT
- 3. PRIVATE NON-MOTORIZED TRANSPORT
- 4. WALKING
- 5. BY MULE
- 6. NONE
- 7. OTHER

#### 19. Time taken to Reach Place of Work [U19A, U19B]

**HOURS AND MINUTES** 

#### 20. Distance to Place of Work in Kilometres [U20]

#### 21. Whether Own Tools or Equipment to Perform Work [U21]

MARKET VALUE OF TOOLS OWNED (0 IF NONE)

#### 22. Whether get any form of Paid Leave [U22]

- 1. VACATION
- 2. SICK LEAVE
- 3. BOTH
- 4. NO TYPE OF PAID LEAVE

# 23. Whether is Insured with I.P.S.S. (Peruvian Social Security Institute) or other Medical Insurance Provider [U23]

- 1. I.P.S.S.
- 2. PRIVATE PROVIDER
- 3. MILITARY OR POLICE
- 4. I.P.S.S AND PRIVATE
- 5. NOT INSURED

#### 24. Whether is member of any Pension Scheme [U24]

- 1. I.P.S.S.
- 2. A.F.P.
- 3. MILITARY OR POLICE
- 4. OTHER
- 5. NONE

#### 25. Number of Employees in Establishment where worked [U25]

- 1. SOLE WORKER
- 2.2 TO 5
- 3.6 TO 10
- 4. 11 TO 20
- 5. 21 TO 50
- 6.51 TO 100
- 7. 101 TO 200
- 8. 201 OR MORE

#### 26. Does the respondent believe the Establishment Pollutes [U26]

- 1. AIR
- 2. WATER
- 3. SOIL OR GROUND
- 4. DOES NOT POLLUTE
- 5. DOES NOT KNOW WHETHER POLLUTES

#### 27. Whether your occupation is harmful to your Health [U27]

- 1. YES
- 2. NO

#### 28. Whether had Secondary Occupation in Past 12 Months [U28]

- 1. YES GO TO PART F
- 2. NO GO TO PART G

# 5F. Secondary Economic Activity in Past 12 Months

DATASET: REG22

- 0. Code Number of Person [V00]
- 1. Description and Code of Occupation in past 12 months [V01]
- 1. IF NOT WORKED IN PAST 7 DAYS GO TO Q. 2
- 2. SAME AS PRINCIPAL OCCUPATION OF LAST 7 DAYS GO TO SECTION 5G
- 3. SAME AS SECONDARY OCCUPATION OF LAST 7 DAYS GO TO SECTION 5G
- 4. DIFFERENT FROM OCCUPATION IN LAST 7 DAYS
- 2. Description and Code of Occupation in Past 12 months [V02]
- 3. Description and Code of Establishment of Past 12 months [V03]
- 4. Number of Months worked in Past 12 Months [V04]
- 5. Number of Days per Week usually worked in Past 12 Months [V05]
- 6. Number of Hours per Day usually worked in Past 12 Months [V06]
- 7. Tenure in the current job and Units (Years, Months, or Weeks)

[V07A, V07B, V07C]

- 8a. Amount of last Payment [V08A]
- 8b. Frequency of Payment [V08B]
- 8c. Month of Last Payment [V08C]

- 0. Code Number of Person [W00]
- 9. Did you work for yourself or as an unpaid family worker [W09]
- 1. SELF
- 2. UNPAID FAMILY WORKER GO TO Q. 18
- 3. NEITHER
- 10. Whether Received any Monetary Payment in addition to Wage [W10A, W10B, W10C]
- 1. YES, AMOUNT and UNIT (OF TIME)
- 2. NO
- 11. Whether Received any Payment in Kind, For example, food or transportation [W11A, W11B, W11C]
- 1. YES, MONEY VALUE OF PAYMENT and UNIT (OF TIME)
- 2. NO
- 12. Whether Received any Additional Payment in Kind, For example, clothes or Uniform or House [W12A, W12B, W12C]
- 1. YES, MONEY VALUE OF PAYMENT and UNIT (OF TIME) 2. NO
- 13. Whether Public or Private Sector [W13]
- 1. PUBLIC SECTOR WORKER
- 2. PRIVATE SECTOR WORKER
- 3. PUBLIC SECTOR EMPLOYEE
- 4. PRIVATE SECTOR EMPLOYEE
- 5. HOUSEHOLD WORKER

#### 14. Whether there is any Union at the Establishment where you work [W14]

- 1. YES
- 2. NO

#### 15. Whether Signed any Contract when Began to Work [W15]

- 1. YES
- 2. NO

**DATASET: REG24** 

#### 0. Code Number of Person [X00]

#### 16. Whether Own Tools or Equipment to Perform Work [X16]

MARKET VALUE OF TOOLS OWNED (0 IF NONE)

#### 17. Whether get any form of Paid Leave [X17]

- 1. VACATION
- 2. SICK LEAVE
- 3. BOTH
- 4. NO TYPE OF PAID LEAVE

# 18. Whether is Insured with I.P.S.S. (Peruvian Social Security Institute) or other Medical Insurance Provider [X18]

- 1. I.P.S.S.
- 2. PRIVATE PROVIDER
- 3. MILITARY OR POLICE
- 4. I.P.S.S AND PRIVATE
- 5. NOT INSURED

#### 19. Whether is member of any Pension Scheme [X19]

- 1. I.P.S.S.
- 2. A.F.P.
- 3. MILITARY OR POLICE
- 4. OTHER
- 5. NONE

#### 20. Number of Employees in Establishment where worked [X20]

- 1. SOLE WORKER
- 2.2 TO 5
- 3.6 TO 10
- 4. 11 TO 20
- 5. 21 TO 50
- 6.51 TO 100
- 7. 101 TO 200 8. 201 OR MORE

#### 21. Whether had Additional Occupation in Past 12 months

#### [X21A, X21B, X21C]

- 1. YES AMOUNT EARNED IN ALL OTHER JOBS AND UNITS (OF TIME)
- 2. NO GO TO PART 5G

# 5G. Other Activity and Miscellaneous in Past 12 Months

DATASET: REG25

- 0. Code Number of Person [Y00]
- 1. Type of Community Service Performed, if any, in past 4 weeks [Y01] DESCRIPTION AND CODE
- 2. Number of Hours of Community Service in a week [Y02]
- 3. Number of months, if any, of work performed in past 2 years for projects financed by FONCODES. [Y03]
- 4. Amount received, and last month and year of receipt [Y04A, Y04B, Y04C]
- 5. Occupation code, if applicable for work performed in October, 1991 [Y05]
- 6. Establishment Category code for work performed in October, 1991 [Y06]
- 0. Code Number of Person [Y00A]
- 7. Sector of Work in October 1991. [Y07]
- 1. PUBLIC SECTOR WORKER
- 2. PRIVATE SECTOR WORKER
- 3. PUBLIC SECTOR EMPLOYEE
- 4. PRIVATE SECTOR EMPLOYEE
- 5. HOUSEHOLD WORKER
- 6. INDEPENDENT
- 7. FAMILY WORK WITHOUT REMUNERATION
- 8. Number of weeks, if any, without work, in past 12 months [Y08]
- 9. Number of weeks, if any, looked for work in past 12 months [Y09]
- 10. Were the weeks without work continuous or in different periods[Y10]
- 1. CONTINUOUS

OR NUMBER OF PERIODS

11. In last 12 months, whether lost job just at end of agricultural season [Y11]

# 6A. Migration - All Household Members 15 Years of Age and Older

- 0. Code Number of Person [Z00]
- 1. Place of Birth [Z01]
- 1. RURAL AREA
- 2. COUNTRY HOUSE
- 3. VILLAGE
- 4. TOWN
- 5. OTHER
- 2. Whether Place of Residence same as Place of Birth [Z02]
- 1. YES
- 2. NO
- 3. Name and code of Province (or Country) of Birth [Z03]
- 4. Age in Years at first Migration from Place of Birth [Z04]
- 5. Main reason for First Migration [Z05]
- 1. TO EARN MORE INCOME
- 2. FOR WORK
- 3. FOR STUDIES
- 4. BECAUSE OF MARRIAGE
- 5. BECAUSE OF TERRORISM
- 6. FAMILY
- 7. OTHER
- 6. Name and Code of Place prior to Current residence [Z06]
- 7. In which year left prior place for Current Residence [Z07]
- 8. Reason for Last Migration [Z08]
- 1. TO EARN MORE INCOME
- 2. FOR WORK
- 3. FOR STUDIES
- 4. BECAUSE OF MARRIAGE
- 5. BECAUSE OF TERRORISM
- 6. FAMILY
- 7. OTHER

# 6B. International Migration - Asked only of Head of the Household

- 1. Whether any member of this household migrated to another country in past 5 Years [AA00]
- 1. YES CONTINUE
- 2. NO GO TO NEXT SECTION
- 2. Code Number of Person Migrated Abroad [AA01]
- **3. Sex of Person [AA03]** 1. MALE 2. FEMALE
- 4. Current Age of Person [AA04]
- **5. Country of Destination [AA05]**
- 6. Reason for Migrating to Another Country [AA06]
- 1. STUDIES
- 2. HEALTH
- 3. TOURISM
- 4. WORK
- 5. FAMILY
- 6. OTHER
- 7. Year in which migrated [AA07]
- 8. Whether Currently working in Country of Destination [AA08]
- 1. YES
- 2. NO

### 7. About Business Establishment (If Owned)

DATASET: REG28

- 1. Whether any household member owns a business [AB01]
- 1. YES
- 2. NO -> GO TO SECTION B
- 2a. Code for Type of 1st Business [AB02A]
- 2b. Code for Type of 2nd Business [AB02B]
- 2c. Code for Type of 3rd Business [AB02C]
- 3. Which of Nos. 1, 2 or 3 is most important business [AB03]
- 4. Code number of Person with most information about the business [AB04]
- 5. Whether manufacture or assemble some product [AB05A]

CODES FOR THREE PRINCIPAL PRODUCTS

[AB05B, AB05C, AB05D]

6. Whether buy products to resell [AB06A]

CODES FOR THREE PRINCIPAL PRODUCTS

[AB06B, AB06C, AB06D]

7. Whether offer services to customers [AB07A]

CODES FOR THREE PRINCIPAL SERVICES [AB07B, AB07C, AB07D]

- 8. Months and Years for which business operating [AB08A, AB08B]
- 9. Number of Workers Employed in Past 12 months [AB09]
- 10. Place of Operation [AB10]
- 1. AT HOME 2. AT OTHER FIXED PLACE 3. MOBILE
- 11. Whether establishment registered with the RUC (Register of Tax-Paying Sole Proprietors) [AB11]
- 1. YES 2. NO
- 12. Months functioning out of last 12 months [AB12]
- 13. Functioning last month 1. YES 2. NO [AB13]
- 14. Revenue of Business last month [AB14]
- 15. Whether Business had non-monetary receipts in the last month [AB15]
- 1. YES
- 2. NO
- 16. Value of non-monetary receipts of business [AB16]
- 17. Whether household consumed or used products of business in last month [AB17]
- 1. YES
- 2. NO
- 18. Value of self-consumption of products of business [AB18]
- 19. Whether bought products last month for sale [AB19]
- 1. YES 2. NO
- 20. Value of products bought last month for sale [AB20]
- 21. Whether incurred other expenditure last month [AB21]
- 1. YES 2. NO
- 22. Value of other expenditures [AB22]

- 0. Expenditure incurred all are YES [AC00]
- 1. Code of Expenditure Item [AC01]
- 2. Amount of Expenditure for the item [AC02]
- 2b. Month of Last Expenditure for the item [AC02B]
- 3. Number of Times or Frequency of Expenditure for item [AC03A]
- 3b. Unit of Time Week, Month, Quarter etc. [AC03B]

## 8. Expenditures and Inventory of Durable Goods

**DATASET: REG30** 

- 0. Daily Expenditures during last 15 days- all are YES [AD00]
- 1. Code number of person providing information [AD01]
- 2. Code number of Item of Expenditure [AD02]
- 3. Amount of Expenditure on item in past 15 days [AD03]

**DATASET: REG31** 

- 0. Expenditures on Semi-duragle goods and Services in last 3 months- all are YES [AE00]
- 1. Code number of Item of Expenditure [AE01]
- 2. Amount of Expenditure on item in past 3 Months [AE02]
- 3. Month when the Expenditure was incurred [AE02B]

**DATASET: REG32** 

- 0. Inventory of Durable Goods- all are YES [AF00]
- 1. Code Number of Asset owned [AF01A]
- 2. Number of Units of Asset Owned [AF02]
- 3. If you had to sell the item, what would you sell it for [AF03]

VARIABLES WAF01A, WAF02, AND WAF03 CONTAIN CORRECTIONS TO VARIABLES AF01A, AF02 AND AF03.

DOMESTIC ELECTRICAL ITEMS PURCHASED IN THE LAST 12 MONTHS (PAGE 8C1 OF THE QUESTIONNAIRE) HAVE NOT BEE INCLUDED IN THE DATASETS.

- 0. Expenditures by Transfer- all are YES [AH00]
- 1. Code Number of Transfer Expenditure [AH01]
- 2. Amount of Expenditure on Item last time [AH02]
- 2b. Month when the Expenditure was incurred [AH02B]
- 3a. Frequency of Expenditure for item in Last 12 Months [AH03A]
- 3b. Unit of Time Week, Month, Quarter etc. [AH03B]

# 9. Expenditure on Food by Household (last 15 days)

DATASET: REG35

- 1. Code number of person responding to questions [AJ01]
- 2. Does the household produce any food for business or home use[AJ02]
- 1. YES, GO TO PART B
- 2. NO
- 3. Whether any food item purchased in past 15 days [AJ03]
- 4a. Code of food item purchased [AJ04A]
- 4. Amount of Expenditure on item in past 2 weeks [AJ04]

- 1. Did the household purchase or use self-produced products in past 15 days [AK00]
- 2. Code of food item [AK01]
- 3. How Food Item was obtained [AK02]
- 1. BOUGHT
- 2. SELF-SUPPLIED
- 3. SELF-CONSUMED
- 4. BOTH
- 3. Total amount of purchase or self-production in past 15 days [AK03]

### 10. Other Income of Household

- 1. Whether received non-labor income in past 12 months [AL00] 1b. Source of other income received [AL01]
- 1. PENSION
- 2. TRANSFERS FROM FAMILY OR EX-FAMILY
- 3. SOCIAL SECURITY (I.P.S.S.)
- 4. OTHER SECURITY (MEDICAL OR LIFE INSURANCE)
- 5. INTEREST FROM SAVINGS ACCOUNT
- 6. DIVIDEND
- 7. RENT
- 8. INDEMNITY
- 9. NON-PROFIT INSTITUTION
- 10. INHERITANCE
- 11. REMITTANCES FROM NON-FAMILY MEMBERS
- 12. REMITTANCES FROM ABROAD
- 2a. Amount received last time [AL02]
- 2b. Month when received income last time [AL02B]
- 3a. Frequency of Receipt in past 12 months [AL03A]
- 3b. Units of Measurement of Frequency [AL03B]

## 11. Saving and Credit Activity of Household

**DATASET: REG38** 

- 0. Whether Financial Transaction Undertaken in last 12 months [AM00]
- 1. Code Number of type of transaction [AM01]
- 2. Number of Times conducted the Transaction in last 12 months [AM02]
- 3. Total amount from all transactions of this code in last 12 months [AM03]
- 4. Month of Last conduct of the transaction [AM04]

- 5. Whether took loan or other source of credit [AN05] 1. YES 2. NO
- 6. Most Important Source of Credit [AN06]
- 1. PERSONAL
- 2. BANK
- 3. CO-OPERATIVE
- 4. A BUSINESS
- 5. OTHER
- 7. Monthly Rate of Interest from this source [AN07]
- 8. Payment Made for Loan in Past month in Soles [AN08]
- 8b. Payment Made for Loan in Past month in Dollars [AN08B]
- 9. Amount of Loan Remaining to be paid in Soles [AN09]
- 9b. Amount of Loan Remaining to be paid in Dollars [AN09B]
- 10. Whether Amount owed by Others to this household [AN10]
- 11. Amount Owed to Household in Soles [AN11]
- 11b. Amount Owed to Household in Dollars [AN11B]
- 12. Whether made a savings deposit of any type in the past 12 months [AN12]
- 13. Whether has any savings on account at this moment [AN13]
- 13a. Amount of savings in Soles [AN13A]
- 13b. Amount of savings in Dollars [AN13B]

# 12. Diary of Food Consumption of Household

- 0. Code Number of Person [AI00]
- 1. (Of Housewife) Whether Cooks food at home [AI01]
- 1. YES 2. NO
- 2a. (Of Each Household Member) Eats Breakfast Daily at Home [AI02A]
- 1. YES 2. NO 3. DOES NOT TAKE BREAKFAST
- 2b. (Of Each Household Member) Eats Lunch Daily at Home AI02B]
- 1. YES 2. NO 3. DOES NOT TAKE LUNCH
- 2c. (Of Each Household Member) Eats Dinner Daily at Home [AI02C]
- 1. YES 2. NO 3. DOES NOT TAKE DINNER
- 3a. (Of those who eat Breakfast Outside) Place where Eat [AI03A]
- 3b. (Of those who eat Breakfast Outside) Expenditure on Meal [AI03B]
- 3c. (Of those who eat Lunch Outside) Place where Eat [AI03C]
- 3d. (Of those who eat Lunch Outside) Expenditure on Meal [AI03D]
- 3e. (Of those who eat Dinner Outside) Place where Eat [AI03E]
- 3f. (Of those who eat Dinner Outside) Expenditure on Meal [AI03F]
- 4. Generally, does the respondent benefit from the Glass of Milk program? If yes, where does the respondent go to get it [AI04]

## 13. Agricultural Activities of Household

DATASET: REG40

- 0. Code Number of Person providing information [AO00]
- 1. Type of Agricultural Activity
- 1. AGRICULTURE [AO01A] 2. ANIMAL HUSBANDRY [AO01B]
- 3. FORESTRY [AO01C]
- 2. Type of Property Rights over land [AO02]
- 1. 100 % PROPRIETORSHIP
- 2. OVER 50 % PROPRIETOR
- 3. A TYPE OF PROPRIETORSHIP
- 4. AWARDEE, SUCCESSFUL BIDDER
- 5. LEASE
- 6. OTHER MIXED FORMS
- 3. Total Land Area Owned or Used (Quantity) [AO03]
- **3b.** Unit of Measurement [AO03B]
- 4a. Land Area under Cultivation [AO04A]
- 4b. Fallow Land Area [AO04B]
- 4c. Natural Pasture Area [AO04C]
- 4d. Woodland Area [AO04D]
- 4e. Other Type of Land Area [AO04E]
- 5. Area Under Exploitation in October, 1991 [AO05]

- 0. Whether Cultivated crop in past 12 Months [AP00]
- 1a. Order Number in Questionnaire of Crop [AP01]
- 1b. Code number of Crop [AP01B]
- 2. Number of times cultivated [AP02]
- 3a. Area Under cultivation of crop [AP03]
- 3b. Units of measuring area [AP03B]
- 4a. Quantity of Crop Produced [AP04A]
- 4b. Unit of Measurement of Quantity [AP04B]
- 4c. TotalProduction in Kilograms[P04C]
- 5a. Quantity of Production assigned for sale [AP05A]
- **5b.** Value of Production assigned for sale [AP05B]
- 6a. Quantity of Production assigned for seeding [AP06A]
- 6b. Value of Production assigned for seeding [P06B]
- 7a. Quantity of Production assigned for Household Consumption [AP07A]
- 7b. Value of Production assigned for Household Consumption [AP07B]
- 8a. Quantity of Production assigned for Barter/Exchange [AP08A]
- 8b. Value of Production assigned for Barter/Exchange [AP08B]
- 9a. Quantity of Production assigned for Processing [AP09A]
- 9b. Value of Production assigned for Processing [AP09B]

# 10a Remaining Quantity of Production [AP10A] 10b. Remaining Value of Production [AP10B]

**DATASET: REG42** 

- 0. Whether Processed Agricultural products for sale in Past 12 months [AQ00]
- 1. YES 2. NO -> GO TO NEXT SECTION
- 1a. Order Number in Questionnaire of Product [AQ01A]
- 1b. Code Number of Product [AQ01B]
- 2a. Quantity of Production of Sub-Product [AQ02A]
- 2b. Quantity of Production in Kilograms [AQ02B]
- 3a. Quantity of Production assigned for sale [AQ03A]
- 3b. Value of Production assigned for sale [AQ03B]
- 4a. Quantity of Production assigned for household consumption [AQ04A]
- 4b. Value of Production assigned for household consumption [AQ04B]
- 5a. Remaining Quantity of Production [AQ05A]
- 5b. Remaining Value of Production [AQ05B]

**DATASET: REG43** 

- 0. Whether Felled or Harvested Trees in Past 12 months [AR00]
- 1. YES 2. NO -> GO TO NEXT SECTION
- 1a. Order Number in Questionnaire of Tree [AR01A]
- 1b. Code Number of Tree [AR01B]
- 2. Total Value of Forestry Products Obtained [AR02]
- 3. Value of Production assigned for sale [AR03]
- 4. Value of Production assigned for self-consumption [AR04]

DATASET: REG44

- 0. Whether any Agricultural Equipment owned [AS00]
- 1. Code Number of Type of Equipment Owned [AS01]
- 2. Number of Units of Each Equipment owned [AS03]
- 3. Current Sale or Market value of Equipment [AS04]

- 1. Whether Purchased any seeds or plants in past 12 months [AT01]
- 2a. Code of 1st Crop for which seed or plant purchased [AT02A]
- 2b. Code of 2nd Crop for which seed or plant purchased [AT02B]
- 2c. Code of 3rd Crop for which seed or plant purchased [AT02BC]
- 2d. Code of 4th Crop for which seed or plant purchased [AT02D]
- 2e. Code of 5th Crop for which seed or plant purchased [AT02E]
- 3. Whether Purchased any Fertilizer in past 12 months [AT03]

#### 4. Type of Fertilizer Purchased [AT04]

- 1. ORGANIC OR NATURAL FERTILIZER
- 2. CHEMICAL FERTILIZER
- 3. BOTH ORGANIC AND CHEMICAL
- 5a. Code of 1st Crop for which fertilizer purchased [AT05A]
- 5b. Code of 2nd Crop for which fertilizer purchased [AT05B]
- 5c. Code of 3rd Crop for which fertilizer purchased [AT05C]
- 5d. Code of 4th Crop for which fertilizer purchased [AT05D]
- 5e. Code of 5th Crop for which fertilizer purchased [AT05E]
- 6. Whether Purchased any Pesticide in past 12 months [AT06]
- 7a. Type of Pesticide Purchased [AT07A]
- 7b. Type of Pesticide Purchased [AT07B]
- 7c. Type of Pesticide Purchased [AT07C]
- 8a. Code of 1st Crop for which pesticide purchased [AT08A]
- 8b. Code of 2nd Crop for which pesticide purchased [AT08B]
- 8c. Code of 3rd Crop for which pesticide purchased [AT08C]
- 8d. Code of 4th Crop for which pesticide purchased [AT08D]
- 8e. Code of 5th Crop for which pesticide purchased [AT08E]
- 9. Whether used any Natural method to control infestations [AT09]

#### 10a. Principal Natural Method used for Controlling Infestations [AT10A]

1. CROP ROTATION

5. RESISTANT SPECIES

- 2. INSECTIVOROUS PLANTS
- 6. INSTALLED TRAPS

3. REPELLENT PLANTS

- 7. OTHER METHODS
- 4. BIOLOGICAL CONTROL

#### 10b. Second Method used for Controlling Infestations [AT10B]

CODES AS FOR 10A ABOVE

10c. Third Method used for Controlling Infestations [AT10C]

CODES AS FOR 10A ABOVE

**DATASET: REG46** 

#### 1. Item of Expenditure of Agricultural Input [AU01]

- 1. SEEDS OR PLANTS
- 2. FERTILIZER OR MANURE
- 3. PESTICIDE, INSECTICIDE OR FUNGICIDE
- 4. SACKS, CANISTERS, OR CONTAINERS
- 5. TRANSPORTATION (GASOLINE, TICKETS)
- 6. WAREHOUSING OR STORAGE COSTS
- 7. HIRED LABOR
- 8. RENT FOR LAND
- 9. PROCESSING COSTS
- 10. OTHER EXPENDITURE, SUCH AS FOR RENTAL OF MACHINERY
- 2. Amount of Expenditure on each Agricultural Input [AU02]

#### **DATASET: REG47**

- 0. Whether bred any animal in the past 12 months [AV00]
- 1a. Order Number in Questionnaire of Animal [AV01A]
- 1b. Code Number of Animal [AV01B]
- 2. Number of each type of Animal owned since the interview month in 1993 [AV02]
- 3a. Number of each type of Animal sold [AV03A]
- 3b. Proceeds from Sale of each type of Animal [AV03B]
- 4a. Number of each type of Animal consumed [AV04A]
- 4b. Value of consumption of each type of Animal [AV04B]
- 5a. Number of each type of Animal assigned for exchange or barter [AV05A]
- 5b. Value of each type of Animal bartered or exchanged [AV05B]
- 6a. Number of each type of Animal used for production of sub-products [AV06A]
- 6b. Value of each type of Animal used for production of sub-products [AV06B]
- 7. Number of each type of Animal purchased or were born [AV07]
- 8. Number of each type of Animal died or were lost [AV08]
- 9. Number of each type of Animal Currently Owned [AV09]

#### **DATASET: REG48**

- 0. Obtained Animal Products from the Animals, e.g., Cheese and Cream [AW00]
- 1a. Order Number in Questionnaire of Animal Product Obtained [AW01A]
- 1b. Code Number of Animal Product Obtained [AW01B]
- 2a. Total Production of Each Animal Product [AW02A]
- 2b. Value of Production of Each Animal Product [AW02B]
- 3a. Production assigned for sale of Each Animal Product [AW03E]
- **3b.** Value of Sale of Each Animal Product [AW03B]
- 4a. Production assigned for consumption of Each Animal Product [AW04A]
- 4b. Value of Consumption of Each Animal Product [AW04B]
- 5a. Remaining Quantity of Production of Each Animal Product [AW05A]
- **5b.** Value of Remaining Production of Each Animal Product [AW05B]

- 1. Item of Expenditure of Animal Husbandry Input [AX01]
- 1. FEED FOR ANIMALS
- 2. PURCHASE OF ANIMALS
- 3. VETERINARY SERVICES
- 4. MEDICINES AND VETERINARY PRODUCTS
- 5. HIRED LABOR
- 6. COSTS OF PROCESSING OF ANIMAL PRODUCTS
- 7. OTHER (SPECIFY)
- 2. Total Value of Expenditure on Animal Husbandry Inputs [AX02]

# 14. Infant Health and Anthropometry - Each Child Less Than 5 Years Old

- 0. Code Number of Person [J00]
- 1. Whether Birth was registered [J01] 1. YES 2. NO
- 2. Age in Years and Months [J02A, J02B]
- 3. Whether Infant was weighed at birth [J03] 1. YES 2. NO
- 4. Weight in Kilograms and Grams [J04]
- 5. Months of Breastfeeding [J05]
- 6. Time in Days between birth and first breastfeeding [J06]
- 7. Did you give the child another form of milk? At what month? [J07]
- 8. Months since weaned on to other liquids [J08]
- 0. Code Number of Person [J00A]
- 9. Months since weaned on to solids [J09]
- 10. Whether had diarrhea or loose motions in past 15 days [J10]
- 1. DIARRHEA
- 2. NO DIARRHEA
- 3. FREQUENT LOOSE MOTIONS
- 4. NO FREQUENT LOOSE MOTIONS
- 11. Liquid Consumption during diarrhea as compared to normal consumption [J11]
- 1. MORE LIQUIDS
- 2. LESS LIQUIDS
- 3. SAME QUANTITY
- 4. DO NOT RECALL
- 5. NEVER HAD DIARRHEA
- 12. Whether continued breast milk or other food during diarrhea [J12]
- 1. YES 2. NO
- 13. Whether sought medical attention during last episode of diarrhea? [J13]
- 1. YES 2. NO
- 14. At place where medical attention was sought, do they hand out or prescribe ORAL REHYDRATION SALTS (ORS) ? [J14]
- 1. HAND OUT
- 2. PRESCRIBE
- 3. NO
- 15. Whether the neighborhood or community has a place where ORS is available on a 24 Hour All Year Round basis? [J15]
- 1. U.R.O.C.
- 2. HOSPITAL
- 3. HEALTH CENTRE
- 4. POINT OF DISTRIBUTION
- 5. NO

- 16. Whether adult can correctly recognize signs of serious respiratory illness such as pneumonia [J16]
- 1. CORRECT
- 2. INCORRECT
- 17. Whether adult can correctly recognize that serious respiratory illness needs immediate medical attention [J17]
- 1. CORRECT
- 2. INCORRECT
- 18. Height in Centimetres [J18E]
- 19. Method of Measurement [J19]
- 1. LYING DOWN
- 2. STANDING UP
- 3. NOT MEASURED
- 20. Weight in Kilograms and Grams [J20]
- 21. Approximate Weight in Grams of Clothes [J21B]
- 0. NO CLOTHES

INTERVIEWER USED LIST OF CLOTHES AND THEIR WEIGHTS TO MAKE GUESS

- 22. Reason for not measuring weight [J22]
- 1. ABSENT
- 2. SICK
- 3. DISABLED
- 4. PARENTS NOT WILLING
- 5. OTHER (SPECIFY)
- 23. Circumference of left arm in centimetres [J23]