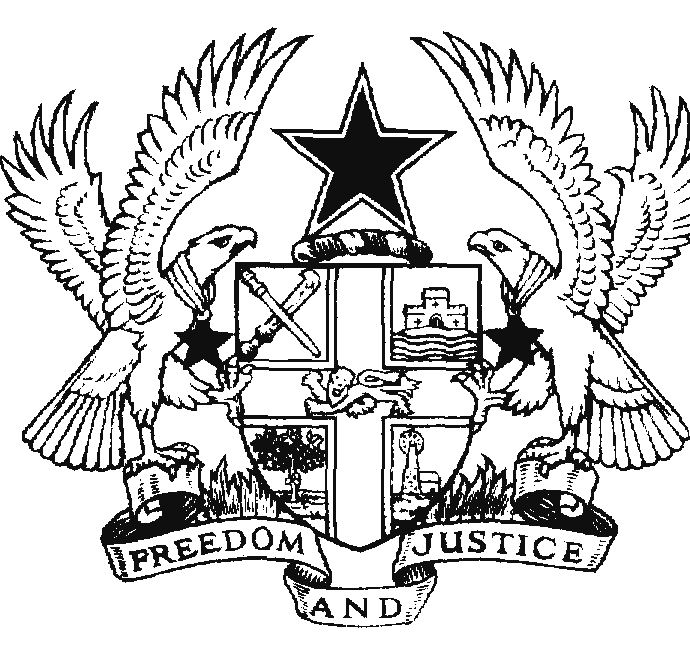
**S U R V E Y I N F O R M A T I O N**

**STATISTICAL SERVICE**



REPUBLIC OF GHANA

**GHANA LIVING STANDARDS SURVEY**

**7**

**2016/2017**

**HOUSEHOLD QUESTIONNAIRE**

**MODULE B**

REGION:

CLUSTER NUMBER:

HOUSEHOLD:

DISTRICT:

|  |  |  |
| --- | --- | --- |
| REGION: …………………………………… DISTRICT:…………………  CLUSTER:. ………………………………… . URBAN/RURAL: …………  ECOLOGICAL ZONE: ……………………… HOUSEHOLD: …………….  GPS COORDINATES:  LOCALITY: ………………….. …………………………………………………………………………  HEAD OF HOUSEHOLD: ……………………..………………………………………………………..  ADDRESS (OR DESCRIPTION): ………………………………………………………………………..  ……………………………………………………………………………………………………………..  HHOLD CONTACT(S): 1…………………………. 2……………………………… 3……………… |  | VERIFICATION OF QUESTIONNAIRE, FIRST VISIT  SUPERVISOR: ……………………… DATE:  REMARKS:………………………………………………………………………………………………….  .  ………………………………………………………. REINTERVIEW YES…….1  BY SUPERVISOR? NO……..2  …………………………………………………………  **REASONS FOR NOT COMPLETING QUESTIONNAIRE**:  DWELLING NOT FOUND/VACANT…….1  OCCUPANT NOT AT HOME……..………2  REFUSAL…………………………..............3 |
|  |
| SECOND VISIT  INTERVIEWER:…………………… … DATE:  REMARKS:…………………………………………………………………………………………………..  ……………………………………………………………………………………………………………….. |
|  |
| VERIFICATION OF QUESTIONNAIRE, SECOND VISIT  SUPERVISOR:…………………… … DATE:  REMARKS:…………………………………………………………………………………………………..  ………………………………………………………REINTERVIEW YES…….1  BY SUPERVISOR? NO……..2 |
|  |
| FIRST VISIT DD MM Y E A R    INTERVIEWER: ………………. DATE:  DWELLING YES…….1 IS THE HEAD YES…….1  FOUND NO..…….2 (>> SUPERVISOR) OF HOUSEHOLD NO..…….2 (>> SUPERVISOR)  THE SAME?  NAME OF NEW HEAD: ………………………………………………………………………………………  ADDRESS (OR DESCRIPTION): ……………………………………………………………………………………..  …………………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………………….  LANGUAGE ENGLISH…………………….1 DAGBANI……………5  USED BY THE AKAN………………………..2 GRUSI……………...6  RESPONDENT: EWE………………………….3 NZEMA……………….7 INTER- YES….1  GA-DANGME………………4 OTHER (SPECIFY)…..8 PRETER NO…..2  USED?  REMARKS: ……………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………….. |
|  |
| THIRD VISIT  INTERVIEWER:…………………… … DATE:  REMARKS:…………………………………………………………………………………………………..  ……………………………………………………………………………………………………………….. |
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| VERIFICATION OF QUESTIONNAIRE, THIRD VISIT  SUPERVISOR:…………………… … DATE:  REMARKS:…………………………………………………………………………………………………..  ………………………………………………………REINTERVIEW YES…….1  BY SUPERVISOR? NO……..2 |

AO.1

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| FOURTH VISIT  INTERVIEWER:…………………………….. DATE:  REMARKS:…………………………………………………………………………………………  ……………………………………………………………………………………………………… |  | SIXTH VISIT  INTERVIEWER:……………………………. DATE:  REMARKS:……………………………………………………………………………………  ………………………………………………………………………………………………… |
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| VERIFICATION OF QUESTIONNAIRE, FOURTH VISIT  SUPERVISOR::……………………………… DATE:  REMARKS:……………………………………………………………………………………………  .  ……………………………………………………………REINTERVIEW YES…….1  BY SUPERVISOR? NO……..2 | VERIFICATION OF QUESTIONNAIRE, SIXTH VISIT  SUPERVISOR::……………………………… DATE:  REMARKS:……………………………………………………………………………………  .  ……………………………………………………REINTERVIEW YES…….1  BY SUPERVISOR? NO……..2 |
|  |  |
| FIFTH VISIT  INTERVIEWER:………………………………. DATE:  REMARKS:………………………………………………………….…………………………………  ………………………………………………………………………………………………………… | SEVENTH VISIT  INTERVIEWER:………………………………. DATE:  REMARKS:…………………………………………………………………………………………  ……………………………………………………………………………………………………… |
|  |  |
| VERIFICATION OF QUESTIONNAIRE, FIFTH VISIT  SUPERVISOR::………………………………. DATE:  REMARKS:……………………………………………………………………………………………  .  ………………………………………………………………REINTERVIEW YES…….1  BY SUPERVISOR? NO……..2 | VERIFICATION OF QUESTIONNAIRE, SEVENTH VISIT  SUPERVISOR::……………………………. DATE:  REMARKS:………………………………………………………………………………………….  .  ……………………………………………………REINTERVIEW YES…….1  BY SUPERVISOR? NO……..2 |

A0.2

**S U M M A R Y O F S U R V E Y R E S U L T S**

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|  | | | | | | **I N T E R V I E W E R** | | | | |  | | |
| **V I S I T** | **S E C T I O N** | **V I S I T S** | | | | | |  | **C H E C K - U P VI S I T S** | | | | **SUPERVISOR**  SATISFACTORY………1  TO BE COMPLETED….2  TO BE REDONE……….3 |
| **D A T E** | | | **R E S U L TS**  COMPLETE………..1  PARTIAL…………..2  DISCONTINUED….3 | **D U R AT I O N** | | **D A T E** | | | **R E S U L TS**  COMPLETE….1  PARTIAL…….2 |
| **DD** | **MM** | **YEAR** | **HR** | **MIN** | **DD** | **MM** | **YEAR** |
|  | | | | | | | | | | | | | |
| FIRST | 1, 2, 5, 6A, 7 |  |  |  |  |  |  |  |  |  |  |  |  |
| SECOND | 3, 8H, 9A, 9B |  |  |  |  |  |  |  |  |  |  |  |
| THIRD | 4, 6B, 8H, 9B |  |  |  |  |  |  |  |  |  |  |  |
| FOURTH | 8A-G, 8H, 9B |  |  |  |  |  |  |  |  |  |  |  |
| FIFTH | 9C, S10, 8H, 9B |  |  |  |  |  |  |  |  |  |  |  |
| SIXTH | 11,8H, 9B |  |  |  |  |  |  |  |  |  |  |  |
| SEVENTH | 12, 13, 8H, 9B |  |  |  |  |  |  |  |  |  |  |  |

AO.3

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| O B S E R V A T I O N A N D C O M M E N T S  O B S E R V A T I O N A N D C O M M E N T S | | |
| REMARKS BY THE INTERVIEWER ON THE FIRST VISIT  .............................................................................  .............................................................................  REMARKS BY THE SUPERVISOR ON THE FIRST VISIT  .............................................................................  .............................................................................  REMARKS BY THE INTERVIEWER ON THE SECOND VISIT  .............................................................................  .............................................................................  REMARKS BY THE SUPERVISOR ON THE SECOND VISIT  .............................................................................  .............................................................................  REMARKS BY THE INTERVIEWER ON THE THIRD VISIT  .............................................................................  .............................................................................  REMARKS BY THE SUPERVISOR ON THE THIRD VISIT  .............................................................................  .............................................................................  REMARKS BY THE INTERVIEWER ON THE FOURTH VISIT  .............................................................................  .............................................................................  REMARKS BY THE SUPERVISOR ON THE FOURTH VISIT  .............................................................................  ............................................................................. |  | REMARKS BY THE INTERVIEWER ON THE FIFTH VISIT  .........................................................................  .........................................................................  REMARKS BY THE SUPERVISOR ON THE FIFTH VISIT  .........................................................................  .........................................................................  REMARKS OF INTERVIEWER ON THE SIXTH VISIT  .........................................................................  .........................................................................  REMARKS BY THE SUPERVISOR ON THE SIXTH VISIT  .........................................................................  .........................................................................  REMARKS BY THE INTERVIEWER ON THE SEVENTH VISIT  .........................................................................  .........................................................................  REMARKS BY THE SUPERVISOR ON THE SEVENTH VISIT  .........................................................................  ......................................................................... |

AO.4 SECTION 8: AGRICULTURE

PART A: AGRICULTURE LAND, LIVESTOCK, EQUIPMENT AND ASSETS

RESPONDENT: HOLDERS - COPY FROM SECTION 6 Q.2

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | | NAMES OF HOLDERS | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | |  | |  | | |  | | | | | | | | | PERSONS INTERVIEWED - ID | | | | | | | | | | | | | | | | | |  | |  | | |  |  | | | | | |
|  | |  | | | | | | | | | | | | | | | | | |  | |  | |  | | |  | | | | | | | |  | | | |  | | | | | |  | |  | | |  |  | | | | | |
|  | | (FROM SECTION 6) | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | |  | |  | | |  | | | | | | | | | | | | | | | | | |  | |  | | |  |  | | | | | |
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|  | | 1. Does any member of your household own any agriculture land (including land outside this area)? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | 1. Did any member of the household own any agriculture land in the past 12 months? | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | |  |  |  |  | | |  | | |  | |  | | |  | | | |  | |  | |  | | | | | | | | |  | | | | | | | |  | | | |  | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Yes…………1 ( >> 3) | | | | | | | | | | | | | |  | | |  | | | | |  | | LIST ALL OWNERS | | | | | | | | | | | | | | | | | | | | | | | | | | Yes……………1 (>> 4) | | | | | | | | | | | | | | |  | | | | |  | | | |
|  | | No……….…2 | | | | | | | | | | | |  | |  | | |  | | | | |  | |  | | | |  | | | | | | | | | | | | | | | | | | | | | | No…………….2 (>> 19) | | | | | | | | | | | | | | |  | | | | |  | | | |
| UNIT | | P U R C H A S E S | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | S A L E S | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
| 3  How much agriculture land is owned by the household now? | | 4  Was any agriculture land bought by any household member in the past 12 months?  Yes………1  No……….2 (>> 6) | | | | | | 5  For how much (incl. payment in kind)? | | | | | | | | | | | | | | | | | 6  Was any agriculture land bought in the two years prior to the past 12 months?  Yes……..1  No………2 (>> 8) | | | | | | 7  For how much (incl. payment in kind)? | | | | | | | | | 8  Was any agriculture land sold by any household member in the past 12 months?  Yes……1  No…….2(>>10) | | | | 9  For how much (incl. payment in kind)? | | | | | | | | | | | | 10  Was any agriculture land sold by any household member in the 2 years prior to the past 12 months?  Yes…1  No…..2 (>>12) | | | | | 11  For how much (including payment in kind)? | | | | | | | | | | |
| AREA | UNIT | VALUE GH¢ | | | | | | | | AREA | | | | UNIT | | | | | VALUE GH¢ | | | | | AREA | | | UNIT | VALUE GH¢ | | | | | AREA | | | | UNIT | | | VALUE GH¢ | | | | AREA | | | UNIT | | | |  | | | |
|  |  |  | | | | | |  | | | | | | | | |  | | | |  | | | |  | | | | | |  | | | | |  | | |  |  | | | |  | | | | |  | | | |  | | |  | | | | |  | | | |  | | |  | | | |  | | | |
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| R E N T A L S | | | | | | | | | | | | | | | | | | | | | | | S H A R E C R O P P I N G | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | | |  | | | | |  | | | | | | | | | |  | | | |
| 12  Was any agriculture land rented out by any household member in the past 12 months?  Yes.....1  No…...2 (>>15) | | | 13  How much agriculture land was rented out in the past 12 months? | | | | | | 14  For how much (including payment in kind was the agriculture land rented)? | | | | | | | | | | | | | | 15  Was any agriculture land given out for sharecropping by any household member in the past 12 months?  Yes.....1  No…...2 (>>19) | | | | | | 16  How much agriculture land was given out for sharecropping in the past 12 months? | | | | | | | | | 17  What proportion of the harvest is received by the household? | | | | 18  How much did your household receive from this? (incl. payment in kind)  **IF YET TO RECEIVE, CODE 00** | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | |  | |
|  | | | | | | | | | | | | | | |
| PROPORTION CODES | | | | | | | | | | | | | | |
|  | | | 75......................3/4  66……..….…..…⅔  50…..…….…..…½  33 ………………⅓  25……..…..….....¼  20..…………….1/5  10…..……..….1/10  5…..……...….1/20  0……………….0/0 | | | | | | | | 1  2  3  4  5  6  7  8  9 |  | | |  | | | | | | | | | | |
|  | | | | | | | | | | |
| UNIT OF AREA | | | | | | | | | | |
| VALUE | | | | | | Acres………………1  Poles……………….2  Ropes………………3  Plot…………………4  Hectares..…………..5  Other (specify)……..6 | | | | | | | | | | |
| AREA | | | UNIT | | | VALUE GH¢ | | | | | | | | | | | | | | AREA | | | | UNIT | | | | | PROPORTION | | | | GH¢ | | | GHp | | |  | |
|  | | |
|  | | |  | | |  | | |  | | | | | | | | | | | | | |  | | | | | |  | | | |  | | | | |  | | | |  | | |  | | |  | |

8.1

SECTION 8: AGRICULTURE

PART A: LIVESTOCK/FISHING/POULTRY

------------------------------------------------------------- ID ----- ------ ID ----- ------

NAMES OF HOLDERS ------------------------------------------------------------- ID ----- ------ PERSONS INTERVIEWED ID ID ----- ------

FROM SECTION 6 ------------------------------------------------------------- ID ----- ------ ID ----- --

19. Has any member of the household owned any livestock or engaged in fishing/fish farming activities during the past 12 months? Yes………..1 No……..….2 ( >> 31)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | 20  During the past 12 months has any member of the household raised/harvested/caught………?  Yes...........1  No............2  (>> Next Item) | 21  How many are there currently? | | | 22  On average how much could you sell one today? | 23  During the past 12 months have any …….. been sold?  Yes.......1  No.........2  (>> 26) | 24  How many? | | 25  What was the total value of the sales? | 26  During the past 12 months, have any ……. been bought by this household?  Yes.......1  No.........2  (>> 29) | 27  How many? | | 28  What was the total value of the purchases? | 29  Did you or any household member rent out any animals during the past 12 months?  Yes...........1  No............2  (>> Next Item) | 30  How much was received from renting animals? |  | **FISHING/ SNAIL UNIT**  Basket..............1  Bowl…….........2  Crate………….3  Colony……….4  Other (specify).5    **TIME UNIT**  Daily………1  Weekly…….2  Fortnightly...3  Monthly……4  Quarterly….5  Yearly……..6 |
| AMOUNT GH¢ | AMOUNT GH¢ | AMT GH¢ | AMT GH¢ |  |
|  | | | | | | | | | | | | | | | | |  |
| Draught Animals e.g bull, donkey, horse, bullock, | 1 |  |  | | |  |  |  | |  |  |  | |  |  |  |  |
| Cattle, excluding those used for work | 2 |  |  | | |  |  |  | |  |  |  | |  | **///////////////////** | **//////////////** |  |
| Sheep | 3 |  |  | | |  |  |  | |  |  |  | |  | **///////////////////** | **//////////////** |  |
| Goats | 4 |  |  | | |  |  |  | |  |  |  | |  | **///////////////////** | **//////////////** |  |
| Pigs | 5 |  |  | | |  |  |  | |  |  |  | |  | **///////////////////** | **//////////////** |  |
| Rabbits | 6 |  |  | | |  |  |  | |  |  |  | |  | **///////////////////** | **//////////////** |  |
| Other livestock | 7 |  | **/////////** | | | **///////////////** |  | **///////////** | |  |  | **///////////** | |  | **///////////////////** | **//////////////** |  |
| Chicken | 8 |  |  | | |  |  |  | |  |  |  | |  | **///////////////////** | **//////////////** |  |
| Guinea fowl | 9 |  |  | | |  |  |  | |  |  |  | |  | **///////////////////** | **//////////////** |  |
| Turkey | 10 |  |  | | |  |  |  | |  |  |  | |  | **///////////////////** | **//////////////** |  |
| Duck | 11 |  |  | | |  |  |  | |  |  |  | |  | **///////////////////** | **//////////////** |  |
| Ostrich | 12 |  |  | | |  |  |  | |  |  |  | |  | **///////////////////** | **//////////////** |  |
| Other poultry | 13 |  | **///////////////** | | | **///////////////** |  | **///////////** | |  | **///////////////////** | **///////////** | |  | **///////////////////** | **//////////////** |  |
| Fishing (river, sea, etc) | 14 |  | **///////////////** | | | **///////////////** |  | **///////////** | |  |  | **//////////** | |  | **///////////////////** | **//////////////** |  |
| Fish farming | 15 |  |  | |  |  |  |  |  |  |  |  |  |  | **////////////////** | **//////////////** |  |  |
| Snail farming | 16 |  |  |  | |  |  |  |  |  | **///////////////////** |  |  |  | **////////////////////** | **//////////////** |  | |  |
| Mushroom | 17 |  |  |  | |  |  |  |  |  |  |  |  |  | **///////////////////** | **//////////////** |  | |
| Grass cutter | 18 |  |  | | |  |  |  | |  |  |  | |  | **//////////////////** | **//////////////** |  | |
| Bee keeping | 19 |  |  | | |  |  |  | |  |  |  | |  | **//////////////////** | **//////////////** |  |  |
| Dogs | 20 |  |  | | |  |  |  | |  |  |  | |  | **//////////////////** | **//////////////** |  |
| Cats | 21 |  |  | | |  |  |  | |  |  |  | |  | **//////////////////** | **//////////////** |  |
| Guinea pig | 22 |  |  | | |  |  |  | |  |  |  | |  | **//////////////////** | **//////////////** |  |
| Dove | 23 |  |  | | |  |  |  | |  |  |  | |  | **///////////////////** | **//////////////** |  |
| Other, specify | 24 |  |  | | |  |  |  | |  |  |  | |  | **///////////////////** | **//////////////** |  |  |

8.2

SECTION 8: AGRICULTURE

PART A: EQUIPMENT

31. Has any member of the household owned any agricultural equipment in the past 12 months?

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Yes………..1  No……..….2 (>> PART B) | | | |  | | |  | | | | |  |  |  | |  | |  | |  | |  | |
|  | | | |  | | |  | | | | |  | |  | |  | |  | |  | |  | |
| TYPE OF AGRICULTURE EQUIPMENT/IMPLEMENT | | | 32  Does any member of the household own any………… now?  Yes...........1  No............2 (>> 35) | | | 32a  Who owns this equipment/implement? | | | | | 33  How many are owned altogether? | | | 34  What would be the total value of ……………. if it/they were sold now? | | 35  Was any …………… rented out in the past 12 months?  Yes...........1  No............2 (>> 37) | | 36  What was the total value of the rental? | | 37  Did you or any household member sell any …………………. in the past 12 months?  Yes...........1  No............2  ( >> Next Item) | | 38  What was the total value of the sales?  **NEXT ITEM** | |
| ID | | | ID | ID | NUMBER | | | TOTAL VALUE GH¢ | | TOTAL VALUE GH¢ | | TOTAL VALUE GH¢ | |
|  | | | | | |  | | | | |  | | | | | | |  | | | | | |
| Tractor | | 21 |  | | |  | | |  |  |  | | |  | |  | |  | |  | |  | |
| Plough | | 31 |  | | |  | | |  |  |  | | |  | |  | |  | |  | |  | |
| Trailer/Cart | | 41 |  | | |  | | |  |  |  | | |  | |  | |  | |  | |  | |
|  |  | | | | | | | | | | | | |  | | | | | | | | | |
| Harvester | | 42 |  | | |  | | |  |  |  | | |  | |  | |  | |  | |  | |
| Other animal drawn equipment | | 51 |  | | |  | | |  |  |  | | |  | |  | |  | |  | |  | |
| Other tractor drawn equipment | | 52 |  | | |  | | |  |  |  | | |  | |  | |  | |  | |  | |
| Spraying machine | | 61 |  | | |  | | |  |  |  | | |  | |  | |  | |  | |  | |
|  |  | | | | | | | | | | | | |  | | | | | | | | | |
| Water pumping machine | | 62 |  | |  | | |  | |  |  | | | |  | |  | |  | |  | |  | |
| Outboard Motor | | 71 |  | | |  | | |  |  |  | | |  | |  | |  | |  | |  | |
| Canoe | | 72 |  | | |  | | |  |  |  | | |  | |  | |  | |  | |  | |
| Fishing Net | | 73 |  | | |  | | |  |  |  | | |  | |  | |  | |  | |  | |
|  |  | | | | | | | | | | | | |  | | | | | | | | | |
| Protective clothing/ safety equipment | | 74 |  | | |  | | |  |  |  | | |  | |  | |  | |  | |  | |
| Hoes | | 75 |  | | |  | | |  |  |  | | |  | |  | |  | |  | |  | |
| Cutlass/matchet | | 76 |  | | |  | | |  |  |  | | |  | |  | |  | |  | |  | |
| Other (specify)………. | | 77 |  | | |  | | |  |  |  | | |  | |  | |  | |  | |  | |

8.3

SECTION 8: AGRICULTURE

PART B: FARMLAND DETAILS

I would like to list all the farm lands **owned or/and operated by household members** during the past 12 months (excluding land rented out or sharecropped out) **or IF NONE >> PART E.**

**LIST ALL THE FARMS FOR EACH HOLDER, STARTING WITH THOSE THAT WERE CULTIVATED 12 MONTHS AGO AND THEN ADDING THOSE THAT WERE PLANTED**

**DURING THE YEAR. FINALLY, LIST ANY FARMS OWNED BY THE HOUSEHOLD WHICH HAVE REMAINED FALLOW FOR THE 12 MONTH PERIOD.**

**FOREACH HOLDER GO RIGHT ACROSS PART C (1) AND C (2)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| H  O  L  D  E  R  I  D | | 2  ID  OF PERSON INTER-VIEWED | 3  F  A  R  M  N  U  M  B  E  R | 3a  Who in the household owns this land?  **(PUT 88 IF OWNED BY NON HOUSEHOLD MEMBER)** | | 4  Size of farm?  UNIT OF AREA  Acres………….1  Poles………….2  Ropes…………3  Plot………...…4  Hectares....……5  Other (specify)..6 | | 5  Is the farm owned by the Holder?  Yes, with deed…..….1  Yes, without deed……...2  No….…….3  (>> 8) | 6  Does the holder have the right to sell the farm or use it as collateral security?  Sell……….1  Security…..2  Both……...3  No right….4  (>> 8) | 7  If the farm were to be sold now how much would it be worth (farm- unhar-vested crops/ live-stock)? | 8  How did (HOLDER) obtain the land?  Bought………….…1  (>> 11)  Rented for cash or  in kind…………...2  Sharecropped  by h/hold………....3  ( >> 10)  Use free of charge…4  (>> 11)  Distributed by village/family…..…5  (>> 11)  Inherited……6>>11 | 9  How much did it cost to rent it over the past 12 months (including payment in kind)? | 10  What propor-tion of crops go to the land-lord?  **SEE CODES**  **Pg 8.1** | 11  Was the farm cultivated during the past 12 months?  Yes……1  No……..2  (>> NEXT FARM) | 12  What crops (incl. tree crops) were growing on this farm during the past 12 months?  **LIST ALL CROPS** | | 13  What crops (incl. tree crops) were planted during the past 12 months?  (1st and 2nd season)  **LIST ALL CROPS** | | | | **CROP LIST FOR CI & C2**  Avocado pear…...01  Bananas.………...02  Baobab..................03  Beans/Peas……...04  Cashew nut……..05  Cassava………....06  Cocoa…………...07  Coconut………....08  Cocoyam………..09  Coffee…………..10  Colanut………….11  Cotton…………...12  G. egg/Egg plan…13  Ginger…………...14  G’nut/Peanut……15  G. corn/Sorghum.16  Kenef……………17  Leafy vegetables...18  Lime/Lemon…….19  Maize……………20  Mango…………...21  Millet…………….22  Oil palm…………23  Okro……………..24  Onion……………25  Oranges/tangerine.26  Pawpaw………….27  Pepper…………...28  Pineapple………..29  Plantain………….30  Potatoes/  Sweet potatoes…..31  Rice……………...32  Rubber…………...33  Sheanut…………..34  Sugarcane………..35  Tiger nut…………36  Tobacco………….37  Tomatoes………...38  Water melon……..39  Wood lot………....40  Yam……………...41  Other crops………42  Other fruits………43  Other vegetables…44  Moringa………….45  Star apple………..46 |
| 1ST SEASON | | 2ND SEASON | |
| ID | ID | AREA | UNIT CODE |  | VALUE (GH¢) | AMOUNT GH¢ |
|  |  | | | | | | | | | | | | | | | | | | | |
|  | |  | 01 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  | 02 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | |  | 15 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

8.4

SECTION 8: AGRICULTURE

PART C (1): HARVEST AND DISPOSAL OF CROPS

I would like to ask some questions about all the crops that have been harvested in the past 12 months, FIRST THE GRAINS, THEN OTHER FIELD CROPS AND CASH CROPS

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| 1  H O L D E R  ID | ID OF PERSON INTERVIEW | 2  Has (HOLDER) harvested any of the following crops in the past 12 months?  **READ FROM CROP LIST AND ENTER THOSE THAT ARE APPLICABLE**  **IF NONE**  **>> PART C (2**) | | 3  What quantity did (HOLDER) harvest in the past 12 months? | | | 4  If sharecropped, how much was given to the landlord in the past 12 months?  **PUT 9999 IF NOT SHARE-CROPPED,**  **IF NONE CODE 0000** | | | | 5  Did (HOLDER) sell any un-processed ….. …… in the past 12 months?  Yes…..1  No……2  (>> 12) | 6  What was the main outlet?  Pre-harvest  contractor…....1  Farm gate buyer………….2  Market trader…3  Consumer……..4  State trading  organ………...5  Coop………….6  Other (specify)……...7 | 7  What quantity did (HOLDER) sell through this outlet? | | | | 8  What was the value of the sales through this outlet? | 9  How promptly were you paid?  Paid before  harvest………...1  At time of. Sale...2  Within 1 week  of sale………...3  Within 1 month  of sale.……...…4  Over 1 month…..5 | 10  Apart from the main outlet, what quantity did (HOLDER) sell through other outlets?  **IF NONE**  **(>> 12**) | | 11  What was the value of these sales? | **UNIT CODES**  **REFER TO CODE BOOK** |
| CROP NAME | CODE | Q’TY | | UNIT CODE | Q’TY | | UNIT CODE | | Q’TY | | | UNIT CODE | VALUE  (GH¢) | QTY | UNIT CODE | VALUE (GH¢) |
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8.5

SECTION 8: AGRICULTURE

PART C (1): HARVEST AND DISPOSAL OF CROPS - CONTINUED

I would like to ask some questions about all the crops that have been harvested in the past 12 months, FIRST THE GRAINS, THEN OTHER FIELD CROPS AND CASH CROPS

**CROP LIST FOR C1 AND C2**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| H O L D E R  ID | ID OF PERSON INTERVIEW | 12  What was the farm size of the........ (crop code) harvested in the past 12 months?  **REF. Pg 8.1** | | | 13  If you had sold all ……………. harvested in the past 12 months, what would have been the total value? | | | 14  What quantity of it was processed by the household in the past 12 months?  **CODE OO IF NONE** | | | 15  What quantity was used as seed in the past 12 months?  **CODE OO IF NONE** | | 16  What quantity of the harvest was given to labour in the past 12 months? | | 17  How many people were hired on the farm to harvest ….. in the past 12 months by sex? | |  | |  |  | | --- | --- | | None.................... | 00 | | Avocado pear…. | 01 | | Bananas.… | 02 | | Beans/Peas……... | 03 | | Cashew nut…….. | 04 | | Cassava……….... | 05 | | Cocoa…………... | 06 | | Coconut……….... | 07 | | Cocoyam……….. | 08 | | Coffee………….. | 09 | | Colanut………… | 10 | | Cotton………….. | 11 | | Garden egg/Egg plant……… | 12 | | Ginger………….. | 13 | | G’nut/Peanut…… | 14 | | Guinea corn/Sorghum……. | 15 | | Kenef…………… | 16 | | Leafy vegetables... | 17 | | Lime/Lemon……. | 18 | | Maize…………… | 19 | | Mango…………... | 20 | | Millet……………. | 21 | | Oil palm………… | 22 | | Okro…………….. | 23 | | Onion…………… | 24 | | Oranges/tangerine. | 25 | | Pawpaw…………. | 26 | | Pepper…………... | 27 | | Pineapple……….. | 28 | | Plantain…………. | 29 | | Potatoes/ Sweet potatoes… | 30 | | Rice……………... | 31 | | Rubber…………... | 32 | | Sheanut…………. | 33 | | Sugarcane……….. | 34 | | Tiger nut………… | 35 | | Tobacco…………. | 36 | | Tomatoes………... | 37 | | Water melon……. | 38 | | Wood lot………... | 39 | | Yam…………….. | 40 | | Other crops……… | 41 | | Other fruits……… | 42 | | Other vegetables… | 43 | | Moringa………… | 44 | | Star apple……….. | 45 | | Baobab………….. | 46 |   **UNIT CODES**  **REFER TO CODE BOOK** |
| AREA | UNIT CODE | Type of cropping | VALUE | | | QUAN-TITY | | UNIT CODE | QUANTITY | UNIT CODE | QUANTITY | UNIT CODE | MALE | FEMALE |  |
| GH¢ | | GHp |
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8.6

SECTION 8: AGRICULTURE

PART C (2): HARVEST AND DISPOSAL OF CROPS - CONTINUED

ROOTS, FRUITS, VEGETABLES AND OTHER CROPS HARVESTED PIECEMEAL **CROP LIST FOR C1 & C2**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 18  HOLDER  SAME AS IN PART C (1)  MEMBER ID | 19  Have you harvested any of the following crops in the past 12 months  **READ FROM CROP LIST C2**  **IF NONE**  **>> PART D** | | 20  Did you harvest any … in the past 2 weeks?  Yes…1  No…2  (>> 23 ) | 21  What quantity did you harvest?  **THE ANSWER MAY BE GIVEN IN ANY UNIT THAT THE HOLDER CHOOSES**. | | 22  If you had sold all ………… harvested in the past 2 weeks, what would have been the total value? | 23  What quantity of the ………… was given to the landlord in the past 2 weeks?  **PUT 9999 IF NOT**  **SHARE CROPPED**  9999 99 | | 24  Did you sell any ………. in the past 2 weeks?  Yes……1  No……2  (>> 27) | 25  What quantity of …….. did you sell in the past 2 weeks? | | 26  What was the value of the sales? | 27  What quantity of the crop was processed in the past 2 weeks? | | | 28  What quantity of the harvest was given to labour in the past 2 weeks? | | | |  |  | | --- | --- | | None.................... | 00 | | Avocado pear…. | 01 | | Bananas.… | 02 | | Beans/Peas……... | 03 | | Cashew nut…….. | 04 | | Cassava……….... | 05 | | Cocoa…………... | 06 | | Coconut……….... | 07 | | Cocoyam……….. | 08 | | Coffee………….. | 09 | | Colanut………… | 10 | | Cotton………….. | 11 | | Garden egg/  Egg plant……… | 12 | | Ginger………….. | 13 | | G’nut/Peanut…… | 14 | | Guinea corn/  Sorghum………. | 15 | | Kenef…………… | 16 | | Leafy vegetables... | 17 | | Lime/Lemon……. | 18 | | Maize…………… | 19 | | Mango…………... | 20 | | Millet……………. | 21 | | Oil palm………… | 22 | | Okro…………….. | 23 | | Onion…………… | 24 | | Oranges/tangerine. | 25 | | Pawpaw…………. | 26 | | Pepper…………... | 27 | | Pineapple……….. | 28 | | Plantain…………. | 29 | | Potatoes/  Sweet potatoes… | 30 | | Rice……………... | 31 | | Rubber…………... | 32 | | Sheanut…………. | 33 | | Sugarcane……….. | 34 | | Tiger nut………… | 35 | | Tobacco…………. | 36 | | Tomatoes………... | 37 | | Water melon……. | 38 | | Wood lot………... | 39 | | Yam…………….. | 40 | | Other crops……… | 41 | | Other fruits……… | 42 | | Other vegetables… | 43 | | Moringa………… | 44 | | Star apple……….. | 45 | | Baobab………….. | 46 |   **UNIT CODES**  **REFER TO PAGE 8.8 OR**  **REFER TO CODE BOOK** |
| CROP NAME | CODE | QUAN-TITY | UNIT CODE | VALUE  Gh¢ | QUAN-TITY | UNIT CODE | QTY | UNIT CODE | VALUE Gh¢ | QUAN-TITY | | UNITCODE | QUAN-TITY | | UNIT CODE |
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8.7

SECTION 8: AGRICULTURE

PART D: SEASONALITY OF SALES AND PURCHASES (KEY STAPLE FOOD ONLY). RESPONDENT IS MAIN HOLDER ONLY

INDICATE WITH A ‘1’ THE MONTHS IN WHICH HARVEST, SALES AND PURCHASES MAINLY TAKE PLACE AND ‘2’ IF NO HARVEST, SALES AND CONSUMPTION

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | |  | HARVEST | | | | | | | | | | | | SALES | | | | | | | | | | | | PURCHASES AND CONSUMPTION | | | | | | | | | | | | STOCKS | | | |  | **UNIT CODE**    American tin……..02  Balls......................03  Bar.........................04  Barrel……….……05  Basket……………06  Beer bottle……….07  Bowl…………......08  Box………………09  Bucket...................10  Bunch……………11  Bundle…………...12  Crate……………..13  Carton……………14  Dozen....................15  Fanta bottle………16  Fingers…………..17  Fruits………….....18  Gallon……………19  Heap……………..43  Kilogram………...20  Litre……………...21  Loaf.......................22  Log………………23  Margarine tin…....24  Maxi bag………...25  Metre…………….26  Mini bag………....27  Nuts……………...28  Packet…………....29  Pair........................30  Pieces....................31  Pot.........................32  Pounds…………...33  Sachet……………34  Set…………….…35  Sheet…………….36  Singles...................37  Stick……………..38  Tonne……………39  Tree……………...40  Tubers…………...41  Yards………..…...42  Other (specify)…..00 |
| CROP | C  O  D  E | 1  Was........ grown during the past 12 months?  Yes.......1  No........2  (>> 4) | 2  In which month(s) was ......................... mainly harvested by you? | | | | | | | | | | | | 3  In which month(s) was ........................... mainly sold by you? | | | | | | | | | | | | 4  In which month(s) was this crop mainly bought for home consumption for the household? | | | | | | | | | | | | 5  What was the quantity in stock 12 months ago? | | 6  What is the quantity in stock now? | |  |
| QTY | UNIT CODE | QTY | UNIT CODE |  |
| J | F | M | A | M | J | J | A | S | O | N | D | J | F | M | A | M | J | J | A | S | O | N | D | J | F | M | A | M | J | J | A | S | O | N | D |  |
| Cassava | 05 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Cocoyam | 08 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Sorghum | 15 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Maize | 19 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Millet | 21 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Plantain | 29 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Rice | 31 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Yam | 40 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | How much were your sales of/from…………………………. | | | | | | | | | | | 1  Hunting (game)? | 2  Wild Honey? | 3  Fruit, berries, etc.? | 4  Milk from cows? | 5  Other dairy products? | 6  Eggs? (both poultry, local eggs and wild egg) | 7  Wild Mushroom? | 8  Wild Snail/crab collection? | 9  Fish from fresh water | 10  Shea nut and other wild fruits | | VALUE (GH¢ | VALUE (GH¢) | VALUE (GH¢) | VALUE (GH¢) | VALUE (GH¢) | VALUE (GH¢) | VALUE (GH¢) | VALUE (GH¢) | VALUE (GH¢) | VALUE (GH¢) | |  |  |  |  |  |  |  |  |  |  |   PART E: OTHER AGRICULTURAL INCOME (IN CASH AND IN KIND)  Now I would like to ask you about household sales of other agricultural produce during the past 12 months | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |

8.8

SECTION 8: AGRICULTURE

PART F: COST AND EXPENSES OF AGRICULTURAL INPUTS

RESPONDENT: MAIN HOLDER ONLY (ASK WHETHER RESPONDENT OWNS OR OPERATES FARM; IF NO >> LIVESTOCK/FISHING COSTS, Q1).

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| I would like to ask about costs and expenses incurred over the past 12 months for the production of crops. During this period, has any of the following been used on any of the holdings?  (DO NOT INCLUDE COSTS ASSOCIATED WITH PROCESSING) | | | | | |  | Now, I would like to ask some questions about your livestock/fishing costs  **(CHECK IF PART 8A Q.20 =1) IF NO LIVESTOCK/POULTRY >> FISHING COSTS** | | | | | |
| **CROP INPUTS** | C  O  D  E | 1  Did you spend anything in cash and/or in kind on ……… in the past 12 months?  Yes….1  No…..2  (>> 4) | 2  How much was spent in cash & in kind on ….. during the past 12 months? | 3  What was the main source of ……?  Private Sector...1  Coop………….2  MoFA………...3  NGOs………...4  Other (specify).5 | 4  Was ……… … obtainable in this community any time during the year when you needed it?  Yes……….….1  No…………...2  NEXT ITEM |  | **LIVESTOCK INPUTS** | C  O  D  E | 1  Did you spend anything in cash and/or in kind on ……… in the past 12 months?  Yes….1  No…..2  (>> 4) | 2  How much was spent in cash & in kind on ….. during the past 12 months? | 3  What was the main source of ……?  Private Sector...1  Coop…………2  MoFA………..3  NGOs………..4  Other (specify)  ………………..5 | 4  Was ……… obtainable in this community any time during the year when you needed it?  Yes……..….1  No……..…..2  NEXT ITEM |
| AMT/VALUE (GH¢) |  | AMT/VALUE (GH¢) |
| Fertilizer (inorganic) chemical | 01 |  |  |  |  |  | Animal feed incl. salt | 51 |  |  |  |  |
| Organic fertilizer composite | 02 |  |  |  |  |  | Vet. Services incl. vac. And medicine | 52 |  |  |  |  |
| Insecticides/Pesticides | 03 |  |  |  |  |  | Paid labour for herding | 53 |  |  |  |  |
| Herbicides/Weedicides | 04 |  |  |  |  |  | Maintenance of pens, stables/hencoop | 54 |  |  |  |  |
| Storage of crops | 05 |  |  |  |  |  | Transport of animal feed | 55 |  |  |  |  |
| Purchased seed, seedlings, etc. | 06 |  |  |  |  |  | Commission on sale of animals | 56 |  |  |  | **/////////////////////// ///////////////////////** |
| Irrigation | 07 |  |  |  |  |  | Hired labour | 57 |  |  |  |  |
| Bags, containers, string, baskets | 08 |  |  |  |  |  | Compensation for damage caused by animals | 58 |  |  |  | **////////////////////////////////////////////////////** |
| Petrol/Diesel/Oil | 09 |  |  |  |  |  | Other livestock costs | 59 |  |  |  |  |
| Spare parts | 10 |  |  |  |  |  | **FISHING INPUTS** |  |  |  |  |  |
| Hired labour | 11 |  |  |  |  |  | Fuel/Lubricants/premix | 61 |  |  |  |  |
| Transport of crops | 12 |  |  |  |  |  | Hired labour | 62 |  |  |  |  |
| Renting animals | 13 |  |  |  |  |  | Spare parts | 63 |  |  |  |  |
| Renting equipment | 14 |  |  |  |  |  | Repairs and Maintenance | 64 |  |  |  |  |
| Hand tools (local) | 15 |  |  |  |  |  | Hiring of Equipment | 65 |  |  |  |  |
| Hand tools (imported) | 16 |  |  |  |  |  | Outboard motor | 66 |  |  |  |  |
| Repairs/Maintenance | 17 |  |  |  |  |  | Fishing net | 67 |  |  |  |  |
| Other crop costs | 18 |  |  |  |  |  | Fish feed | 68 |  |  |  |  |
|  |  |  |  |  |  |  | Veterinary services | 69 |  |  |  |  |
|  |  |  |  |  |  |  | Other Inputs | 70 |  |  |  |  |

8.9

SECTION 8: AGRICULTURE

PART G: PROCESSING OF AGRICULTURAL PRODUCE

RESPONDENT: PERSON RESPONSIBLE FOR PROCESSING

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | | | | | | | | | | | | NAMES OF PERSONS RESPONSIBLE  COPY FROM SECTION 6 Q.6 | | | ID | |  | |  | | |  | |
| CHECK IF SECTION 6 Q.5 = 1 | | | | | | | | | |  | |  | | |  | |  | | |  | |
|  | | |  | |  | |  | | |  | |
| I would now like to ask about processing of crops and smoking of fish/meat. This processing means any crops/fish processed by the household, whether grown/or caught by your household or by anyone else. | | | | | | | | | |  | | |  | |  | | |  | |
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|  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 | | 2 | | 3  What type of food processing or transformation have you carried out in the past 12 months?  **REFER TO LIST OF PRODUCTS BELOW AND WRITE ITEM AND CODE** | | 4  How many months in the past 12 months did you do this activity? | 5  Did you make any …………….. in the past 2 weeks?  Yes…..1  No…...2  (>> 10) | 6  What quantity did you process in the past 2 weeks?  **USE ANY UNIT OF THE RESPONDENT’S CHOICE** | | | 7  What were your labour costs both in cash and in kind in the past 2 weeks?  **BE SURE TO INCLUDE RESPONDENT TIME (LABOUR COST)** | | 8  Where did the raw materials mainly come from?  Own produce…...1  Purchased…2  Gift………..3  Other……...4  (specify) | 9  What other cost (non-labour) did you incur in the past 2 weeks? | | 10  Did you sell any ……….. in the past 2 weeks?  Yes……..1  No………2  (>> 13) | | 11  What quantity did you sell? | | | 12  What was the value of the sales?  >>  NEXT ITEM | | 13  For how much could you sell one unit? | | | | | |
| PERSON | RESPONSIBLE | PERSON | INTERVIEWED |
| ID | | ID | | ITEM | CODE | MONTHS |  | QUAN-TITY | UNIT CODE | | VALUE (GH¢) | | VALUE (GH¢) | | QUAN-TITY | | UNIT CODE | AMOUNT | | UNIT CODE | | VALUE (GH¢) | | | |
|  | |  | |  |  |  |  |  |  | |  | |  |  | |  | |  | |  |  | |  | |  | | | |
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|  | | | | **UNIT CODE** | | | | **UNIT CODE**  Fanta bottle……………………….....16  Fingers……………………………….17  Fruit………………………………....18  Gallon……………………………….19  Kilogram……………………..……...20  Litre……………………….………...21  Loaf....................................................22  Log………………………………….23  Margarine tin……………………….24  Maxi bag…………………….……...25  Metre……………………………….26  Mini bag……………………………27  Nut………………………………….28  Packet………………………….…..29 | | | | | **UNIT CODE**  Pair...................................................30  Pieces...............................................31  Pot....................................................32  Pounds……………………………..33  Sachet………………………..…….34  Set………………………………….35  Sheet……………………………….36  Single...............................................37  Stick…………………………..…...38  Tonne………………………….…..39  Tree………………………….…….40  Tubers……………………….……41  Yards……………………....……...42  Other (specify)……………………00  **CHECK FOR MORE CODES FROM CODE BOOK** | | | | | **CODES FOR PROCESSED/ TRANSFORMED GOODS** | | | | | | | |  |
| American tin……………………….….02  Balls.......................................................03  Bar.........................................................04  Barrel……………………………….…05  Basket…………………………..……..06  Beer bottle…………………………….07  Bowl……………………………….….08  Box…………………………………....09  Bucket...................................................10  Bunch………………………………....11  Bundle…………………………….…..12  Crate………………………………….13  Carton…………………………….…..14  Dozen...................................................15 | | | |
|  | | | | Cassava flour…………………….01  Cassava chips.................................02  Cooking oils……………………..03  Flour from other grains………….04  Gari……………………………....05  Groundnut paste………………....06  Home-brewed drink……………..07  Milled rice……................…….....08  Maize flour…………………….…09  Processed fish…………………....10  Processed meat…………………..11  Shea butter………………..……..12  Cassava dough…………………...13  Corn dough………………………14  Other (specify)…………………...15 | | | | | | | |  |

8.10

SECTION 8: AGRICULTURE

PART H: CONSUMPTION OF OWN PRODUCE

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| NAME OF PERSON RESPONSIBLE ID CODE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| RESPONDENT (COPY FROM SECTION 6 Q.7) | | | |  | |  | |  |  |  | | | | | | | | | | | | | | |  | | |  | | | | PERSON INTERVIEWED ID | | | | | | | | | | | | | | |  | | |  | |  | | |  | | | |
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| 2nd 3rd 4th 5th 6th 7th  / | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ITEM | CODE | | 1  Did the household consume any own produced ……….. in the past 12 months?  Yes… .1  No……2  Next Item | | | | 2  How many months altogether was own produced ……….. consumed during the past 12 months? | | 3  How much of own produced ……. was consumed by the household since my last visit?  (>> 9) | | | | | 4  How much of own produced …….. was consumed by the household since my last visit? | | | | | 5  How much of own produced …….. was consumed by the household since my last visit? | | | | | | | 6  How much of own produced ……. was consumed by the household since my last visit? | | | | 7  How much of own produced ……. was consumed by the household since my last visit? | | | | | 8  How much of own produced …….. was consumed by the household since my last visit? | | | | | | 9  For how much would you sell one unit of …………..now?  **USE MOST OCCURING UNIT OF MEASURE** | | | | | | | | **UNIT CODES**  **REFER TO**  **PAGE 8.10**  **OR**  **REFER TO**  **CODE**  **BOOK** | | | | | | | |
| NO. OF MONTHS | | QUAN-TITY | | | | UNIT CODE | QUAN-TITY | | | | UNIT CODE | QUAN-TITY | | | | UNIT CODE | | | QUAN-TITY | | UNIT CODE | | QUAN-TITY | | | | UNIT CODE | QUAN-TITY | | | UNIT CODE | | | AMOUNT | | | | | | | |
| GH¢ | | | | | GHp | | |
| **GRAINS AND FLOURS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Rice(paddy, grain) | 001 | |  | | | |  | |  | | |  | |  | | |  | |  | | |  | | | |  | |  | |  | | |  | |  | | |  | | |  | | | |  | | | |  | | | | | | |
| Maize-cob (fresh) | 002 | |  | | | |  | |  | | |  | |  | | |  | |  | | |  | | | |  | |  | |  | | |  | |  | | |  | | |  | | | |  | | | |
| Maize-flour/dough | 003 | |  | | | |  | |  | | |  | |  | | |  | |  | | |  | | | |  | |  | |  | | |  | |  | | |  | | |  | | | |  | | | |
| Sorghum/ guinea corn | 004 | |  | | | |  | |  | | |  | |  | | |  | |  | | |  | | | |  | |  | |  | | |  | |  | | |  | | |  | | | |  | | | |
| Millet grain | 005 | |  | | | |  | |  | | |  | |  | | |  | |  | | |  | | | |  | |  | |  | | |  | |  | | |  | | |  | | | |  | | | |
| Millet flour | 006 | |  | | | |  | |  | | |  | |  | | |  | |  | | |  | | | |  | |  | |  | | |  | |  | | |  | | |  | | | |  | | | |
| Other grains | 008 | |  | | | |  | |  | | |  | |  | | |  | |  | | |  | | | |  | |  | |  | | |  | |  | | |  | | |  | | | |  | | | |
| Other flours | 009 | |  | | | |  | |  | | |  | |  | | |  | |  | | |  | | | |  | |  | |  | | |  | |  | | |  | | |  | | | |  | | | |

8.11

SECTION 8: AGRICULTURE

PART H: CONSUMPTION OF OWN PRODUCE

NAME OF PERSON RESPONSIBLE ID CODE

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| RESPONDENT (COPY FROM  SECTION 6 Q.7) | | | | | | |  | |  |  | | |  | |  | | | | | | | | | | | | | | |  | | | |  | | PERSON INTERVIEWED ID | | | | | | | | | | | | | | |  | | | | | | |  | |  | | | | |  | | | |
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| 2nd 3rd 4th 5th 6th 7th  /  /  / | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ITEM | | CODE | | 1  Did the household consume any own produced ……….. in the past 12 months?  Yes… .1  No……2  >>Next Item | | | 2  How many months altogether was own produced ……….. consumed during the past 12 months? | | | | 3  How much of own produced ……. was consumed by the household since my past visit?  (>> 9) | | | | | | | | | 4  How much of own produced …….. was consumed by the household since my past visit? | | | | | | | | 5  How much of own produced …….. was consumed by the household since my past visit? | | | | | | | | 6  How much of own produced ……. was consumed by the household since my past visit? | | | | 7  How much of own produced ……. was consumed by the household since my past visit? | | | | | | | 8  How much of own produced …….. was consumed by the household since my past visit? | | | | | | | | | 9  For how much would you sell one unit of …………..now?  **USE MOST OCCURING UNIT OF MEASURE** | | | | | | |
| NO. OF MONTHS | | | | QUAN-TITY | | | | | | UNIT CODE | | | QUAN-TITY | | | | UNIT CODE | | | | QUAN-TITY | | | | UNIT CODE | | | | QUAN-TITY | | UNIT CODE | | QUAN-TITY | | | | UNIT CODE | | | QUAN-TITY | | | | | UNIT CODE | | | | AMOUNT | | | | | | |
| GH¢ | | | | | GHp | |
| **ROOTS, TUBERS AND PLANTAIN** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cassava – tubers | | 010 | |  | | |  | | | |  | | | | |  | | | |  | | |  | | | | |  | |  | | | | | |  | |  | |  | | |  | | | |  | | | | |  | | | |  | | | |  | | |
| Cassava - gari | | 011 | |  | | |  | | | |  | | | | |  | | | |  | | |  | | | | |  | |  | | | | | |  | |  | |  | | |  | | | |  | | | | |  | | | |  | | | |  | | |
| Cassava(other forms) | | 012 | |  | | |  | | | |  | | | | |  | | | |  | | |  | | | | |  | |  | | | | | |  | |  | |  | | |  | | | |  | | | | |  | | | |  | | | |  | | |
| Yam | | 013 | |  | | |  | | | |  | | | | |  | | | |  | | |  | | | | |  | |  | | | | | |  | |  | |  | | |  | | | |  | | | | |  | | | |  | | | |  | | |
| Cocoyam | | 014 | |  | | |  | | | |  | | | | |  | | | |  | | |  | | | | |  | |  | | | | | |  | |  | |  | | |  | | | |  | | | | |  | | | |  | | | |  | | |
| Plantain | | 015 | |  | | |  | | | |  | | | | |  | | | |  | | |  | | | | |  | |  | | | | | |  | |  | |  | | |  | | | |  | | | | |  | | | |  | | | |  | | |
| Sweet potatoes | | 016 | |  | | |  | | | |  | | | | |  | | | |  | | |  | | | | |  | |  | | | | | |  | |  | |  | | |  | | | |  | | | | |  | | | |  | | | |  | | |
| Other roots & tubers | | 017 | |  | | |  | | | |  | | | | |  | | | |  | | |  | | | | |  | |  | | | | | |  | |  | |  | | |  | | | |  | | | | |  | | | |  | | | |  | | |
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8.12

SECTION 8: AGRICULTURE

PART H: CONSUMPTION OF OWN PRODUCE NAME OF PERSON RESPONSIBLE ID CODE

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| RESPONDENT (COPY FROM | | | | | |  | | | |  | | |  | | | | | | | | | |  | | | | |  | PERSON INTERVIEWED ID | | | | | | | | | | | | | |  | | | | |  | |  | | | | |  | |
| SECTION 6 Q.7) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2nd 3rd 4th 5th 6th 7th  /  /  / | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | |  | | | |  |  |  | | |  | | | |  | |  | | |  |  | |  | | |  | |  |
| day month day month day month day month day month day month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ITEM | | CODE | | 1  Did the household consume any own produced ……….. in the past 12 months?  Yes… .1  No……2  Next Item | | 2  How many months altogether was own produced ……….. consumed during the past 12 months? | | 3  How much of own produced ……. was consumed by the household since my last visit?  (>> 9) | | | | | | | 4  How much of own produced …….. was consumed by the household since my last visit? | | | | | | 5  How much of own produced …….. was consumed by the household since my last visit? | | | | | | | | 6  How much of own produced ……. was consumed by the household since my last visit? | | | | 7  How much of own produced ……. was consumed by the household since my last visit? | | | | | | 8  How much of own produced …….. was consumed by the household since my last visit? | | | | | | | | 9  For how much would you sell one unit of …………..now?  **USE MOST OCCURING UNIT OF MEASURE** | | | | | |
| NO. OF MONTHS | | QUAN-TITY | | | | | | UNIT CODE | QUAN-TITY | | | | UNIT CODE | | QUAN-TITY | | | | UNIT CODE | | | | QUAN-TITY | | UNIT CODE | | QUAN-TITY | | | | UNIT CODE | | QUAN-TITY | | | | | UNIT CODE | | | AMOUNT | | | | | |
| GH¢ | | | | GHp | |
| **PULSES, NUTS AND SEED/OIL** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Bambara beans | | 020 | |  | |  | |  | | | | |  | |  | | |  | | |  | | |  | | | | |  | |  | |  | | |  | | |  | | | | |  | | |  | | |  | | |
| Cowpeas | | 021 | |  | |  | |  | | | | |  | |  | | |  | | |  | | |  | | | | |  | |  | |  | | |  | | |  | | | | |  | | |  | | |  | | |
| Soya beans | | 022 | |  | |  | |  | | | | |  | |  | | |  | | |  | | |  | | | | |  | |  | |  | | |  | | |  | | | | |  | | |  | | |  | | |
| Groundnuts (roasted or raw) | | 023 | |  | |  | |  | | | | |  | |  | | |  | | |  | | |  | | | | |  | |  | |  | | |  | | |  | | | | |  | | |  | | |  | | |
| Other legumes/ pulses | | 024 | |  | |  | |  | | | | |  | |  | | |  | | |  | | |  | | | | |  | |  | |  | | |  | | |  | | | | |  | | |  | | |  | | |
| Palm nuts | | 025 | |  | |  | |  | | | | |  | |  | | |  | | |  | | |  | | | | |  | |  | |  | | |  | | |  | | | | |  | | |  | | |  | | |
| Coconut | | 026 | |  | |  | |  | | | | |  | |  | | |  | | |  | | |  | | | | |  | |  | |  | | |  | | |  | | | | |  | | |  | | |  | | |
| Other nuts/seeds | | 027 | |  | |  | |  | | | | |  | |  | | |  | | |  | | |  | | | | |  | |  | |  | | |  | | |  | | | | |  | | |  | | |  | | |
| Palm oil | | 028 | |  | |  | |  | | | | |  | |  | | |  | | |  | | |  | | | | |  | |  | |  | | |  | | |  | | | | |  | | |  | | |  | | |
| Palm kernel oil | | 029 | |  | |  | |  | | | | |  | |  | | |  | | |  | | |  | | | | |  | |  | |  | | |  | | |  | | | | |  | | |  | | |  | | |
| Coconut oil | | 030 | |  | |  | |  | | | | |  | |  | | |  | | |  | | |  | | | | |  | |  | |  | | |  | | |  | | | | |  | | |  | | |  | | |
| Groundnut oil | | 031 | |  | |  | |  | | | | |  | |  | | |  | | |  | | |  | | | | |  | |  | |  | | |  | | |  | | | | |  | | |  | | |  | | |
| Shea butter | | 032 | |  | |  | |  | | | | |  | |  | | |  | | |  | | |  | | | | |  | |  | |  | | |  | | |  | | | | |  | | |  | | |  | | |
| Other oil | | 033 | |  | |  | |  | | | | |  | |  | | |  | | |  | | |  | | | | |  | |  | |  | | |  | | |  | | | | |  | | |  | | |  | | |

8.13

SECTION 8: AGRICULTURE NAMES OF PERSONS RESPONSIBLE ID CODE

PART H: CONSUMPTION OF OWN PRODUCE

|  |  |  |  |  |  |  |
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| RESPONDENT (COPY FROM |  |  |  |  |  | PERSON INTERVIEWED ID |  |  |  |  |

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| SECTION 6 Q.7) |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 2nd 3rd 4th 5th 6th 7th  /  /  / | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| day month day month day month day month day month day month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ITEM | | CODE | | | 1  Did the household consume any own produced ……….. in the past 12 months?  Yes… .1  No……2  Next Item | | | 2  How many months altogether was own produced ……….. consumed during the past 12 months? | | 3  How much of own produced ……. was consumed by the household since my last visit?  (>> 9) | | | | | 4  How much of own produced …….. was consumed by the household since my last visit? | | | | | | | 5  How much of own produced …….. was consumed by the household since my last visit? | | | | | | 6  How much of own produced ……. was consumed by the household since my last visit? | | | | | | 7  How much of own produced ……. was consumed by the household since my last visit? | | | | | | 8  How much of own produced …….. was consumed by the household since my last visit? | | | | | | | 9  For how much would you sell one unit of …………..now?  **USE MOST OCCURING UNIT OF MEASURE** | | | | | | |
| NO. OF MONTHS | | QUAN-TITY | | | | UNIT CODE | QUAN-TITY | | | | UNIT CODE | | | QUAN-TITY | | | UNIT CODE | | | QUAN-TITY | | | UNIT CODE | | | QUAN-TITY | | | UNIT CODE | | | QUAN-TITY | | | | UNIT CODE | | | AMOUNT | | | | | | |
| GH¢ | | | | GHp | | |
| **FRUITS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Bananas | | | 040 | | |  |  | | |  | | |  | | |  | | | |  | | |  | | |  | | |  | | |  | |  | | | |  | |  | | | | |  | | | |  | | |  | |
| Water melon | | | 041 | | |  |  | | |  | | |  | | |  | | | |  | | |  | | |  | | |  | | |  | |  | | | |  | |  | | | | |  | | | |  | | |  | |
| Oranges, tangerine | | | 042 | | |  |  | | |  | | |  | | |  | | | |  | | |  | | |  | | |  | | |  | |  | | | |  | |  | | | | |  | | | |  | | |  | |
| Mangoes | | | 043 | | |  |  | | |  | | |  | | |  | | | |  | | |  | | |  | | |  | | |  | |  | | | |  | |  | | | | |  | | | |  | | |  | |
| Pawpaw | | | 044 | | |  |  | | |  | | |  | | |  | | | |  | | |  | | |  | | |  | | |  | |  | | | |  | |  | | | | |  | | | |  | | |  | |
| Avocado pears | | | 045 | | |  |  | | |  | | |  | | |  | | | |  | | |  | | |  | | |  | | |  | |  | | | |  | |  | | | | |  | | | |  | | |  | |
| Pineapples | | | 046 | | |  |  | | |  | | |  | | |  | | | |  | | |  | | |  | | |  | | |  | |  | | | |  | |  | | | | |  | | | |  | | |  | |
| Other fruits | | | 047 | | |  |  | | |  | | |  | | |  | | | |  | | |  | | |  | | |  | | |  | |  | | | |  | |  | | | | |  | | | |  | | |  | |

8.14

SECTION 8: AGRICULTURE

PART H: CONSUMPTION OF OWN PRODUCE NAME OF RESPONSIBLE PERSON ID CODE

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | | | | | | | | | | | | | | | | | | | | | | | | | |
| RESPONDENT (COPY FROM | | | | |  | |  |  | | | | | | |  | |  | | PERSON INTERVIEWED ID | | | | | | |  | |  | | |  | | |  | |
| SECTION 6 Q.7) | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2nd 3rd 4th 5th 6th 7th  /    /  /  /  /  / | | | | | | | | | | | | | | | | | | | | | | | | | |
| day month day month day month day month day month day month | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ITEM | | CODE | 1  Did the household consume any own produced ……….. in the past 12 months?  Yes… .1  No……2  Next Item | | 2  How many months altogether was own produced ……….. consumed during the past 12 months? | 3  How much of own produced ……. was consumed by the household since my last visit?  (>> 9) | | | | 4  How much of own produced …….. was consumed by the household since my last visit? | | | 5  How much of own produced …….. was consumed by the household since my last visit? | | | | | | 6  How much of own produced ……. was consumed by the household since my last visit? | | 7  How much of own produced ……. was consumed by the household since my last visit? | | | 8  How much of own produced …….. was consumed by the household since my last visit? | | | | 9  For how much would you sell one unit of …………..now?  **USE MOST OCCURING UNIT OF MEASURE** | | | | | |
| NO. OF MONTHS | QUAN-TITY | | | UNIT CODE | QUAN-TITY | | UNIT CODE | QUAN-TITY | | | | UNIT CODE | | QUAN-TITY | UNIT CODE | QUAN-TITY | | UNIT CODE | QUAN-TITY | | UNIT CODE | | AMOUNT | | | | | |
| GH¢ | | | | GHp | |
| **VEGETABLES** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Tomatoes | | 050 |  | |  |  | |  | |  |  | |  | |  | | | |  |  |  |  | |  | |  | |  | | |  | | |
| Onions | | 051 |  | |  |  | |  | |  |  | |  | |  | | | |  |  |  |  | |  | |  | |  | | |  | | |
| Carrots | | 052 |  | |  |  | |  | |  |  | |  | |  | | | |  |  |  |  | |  | |  | |  | | |  | | |
| Okro | | 053 |  | |  |  | |  | |  |  | |  | |  | | | |  |  |  |  | |  | |  | |  | | |  | | |
| G-egg/egg plant | | 054 |  | |  |  | |  | |  |  | |  | |  | | | |  |  |  |  | |  | |  | |  | | |  | | |
| Pepper | | 055 |  | |  |  | |  | |  |  | |  | |  | | | |  |  |  |  | |  | |  | |  | | |  | | |
| Cabbage/ lettuce | | 056 |  | |  |  | |  | |  |  | |  | |  | | | |  |  |  |  | |  | |  | |  | | |  | | |
| Nkontomire | | 057 |  | |  |  | |  | |  |  | |  | |  | | | |  |  |  |  | |  | |  | |  | | |  | | |
| Gboma | | 058 |  | |  |  | |  | |  |  | |  | |  | | | |  |  |  |  | |  | |  | |  | | |  | | |
| Ayoyo/Ahefu | | 059 |  | |  |  | |  | |  |  | |  | |  | | | |  |  |  |  | |  | |  | |  | | |  | | |
| Dawadawa | | 060 |  | |  |  | |  | |  |  | |  | |  | | | |  |  |  |  | |  | |  | |  | | |  | | |
| Other leafy vegetables | | 061 |  | |  |  | |  | |  |  | |  | |  | | | |  |  |  |  | |  | |  | |  | | |  | | |
| Other vegetables | | 062 |  | |  |  | |  | |  |  | |  | |  | | | |  |  |  |  | |  | |  | |  | | |  | | |

8.15

SECTION 8: AGRICULTURE

PART H: CONSUMPTION OF OWN PRODUCE NAME OF PERSON RESPONSIBLE ID CODE

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| RESPONDENT (COPY FROM  SECTION 6 Q.7) | | | | | | |  | | | | |  | | | | | |  | | |  | | | PERSON INTERVIEWED ID | | | | | | | | | | | | |  |  | | | |  | |  | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2nd 3rd 4th 5th 6th 7th  /  /  /  / | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| /  /  day month day month day month day month day month day month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ITEM | | | CODE | | 1  Did the household consume any own produced ……….. in the past 12 months?  Yes… .1  No……2  Next Item | | | 2  How many months altogether was own produced ……….. consumed during the past 12 months? | | 3  How much of own produced ……. was consumed by the household since my last visit?  (>> 9) | | | | 4  How much of own produced …….. was consumed by the household since my last visit? | | | | | 5  How much of own produced …….. was consumed by the household since my last visit? | | | | | | 6  How much of own produced ……. was consumed by the household since my last visit? | | | | 7  How much of own produced ……. was consumed by the household since my last visit? | | | 8  How much of own produced …….. was consumed by the household since my last visit? | | | | | | | 9  For how much would you sell one unit of …………..now?  **USE MOST OCCURING UNIT OF MEASURE** | | | | |
| NO. OF MONTHS | | QUAN-TITY | | UNIT CODE | | QUAN-TITY | | UNIT CODE | | | QUAN-TITY | | UNIT CODE | | | | QUAN-TITY | | UNIT CODE | | QUAN-TITY | UNIT CODE | | QUAN-TITY | | | UNIT CODE | | | | AMOUNT | | | | |
| GH¢ | | | GHp | |
| **MEAT, POULTRY, FISH** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Chicken | | 062 | |  | | |  | |  | | | |  | |  |  | |  | | | |  | |  | |  | |  | |  |  | | |  | | | | | |  | |  | |
| Guinea fowl | | 063 | |  | | |  | |  | | | |  | |  |  | |  | | | |  | |  | |  | |  | |  |  | | |  | | | | | |  | |  | |
| Other domestic poultry | | 064 | |  | | |  | |  | | | |  | |  |  | |  | | | |  | |  | |  | |  | |  |  | | |  | | | | | |  | |  | |
| Game birds | | 065 | |  | | |  | |  | | | |  | |  |  | |  | | | |  | |  | |  | |  | |  |  | | |  | | | | | |  | |  | |
| Beef | | 066 | |  | | |  | |  | | | |  | |  |  | |  | | | |  | |  | |  | |  | |  |  | | |  | | | | | |  | |  | |
| Mutton | | 067 | |  | | |  | |  | | | |  | |  |  | |  | | | |  | |  | |  | |  | |  |  | | |  | | | | | |  | |  | |
| Pork | | 068 | |  | | |  | |  | | | |  | |  |  | |  | | | |  | |  | |  | |  | |  |  | | |  | | | | | |  | |  | |
| Goat | | 069 | |  | | |  | |  | | | |  | |  |  | |  | | | |  | |  | |  | |  | |  |  | | |  | | | | | |  | |  | |
| Other domestic meat | | 070 | |  | | |  | |  | | | |  | |  |  | |  | | | |  | |  | |  | |  | |  |  | | |  | | | | | |  | |  | |
| Wild game | | 071 | |  | | |  | |  | | | |  | |  |  | |  | | | |  | |  | |  | |  | |  |  | | |  | | | | | |  | |  | |
| Fish & shellfish | | 072 | |  | | |  | |  | | | |  | |  |  | |  | | | |  | |  | |  | |  | |  |  | | |  | | | | | |  | |  | |
| Eggs | | 073 | |  | | |  | |  | | | |  | |  |  | |  | | | |  | |  | |  | |  | |  |  | | |  | | | | | |  | |  | |
| Snail | | 074 | |  | | |  | |  | | | |  | |  |  | |  | | | |  | |  | |  | |  | |  |  | | |  | | | | | |  | |  | |

8.16

SECTION 8: AGRICULTURE

PART H: CONSUMPTION OF OWN PRODUCE NAME OF PERSON RESPONSIBLE ID CODE

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| RESPONDENT (COPY FROM | | | | | |  | | | | |  | | | | | |  | | |  | | PERSON INTERVIEWED ID | | | | | | | | | | |  | | |  | | | |  | | | |  | | |
| SECTION 6 Q.7) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 2nd 3rd 4th 5th 6th 7th  /  /  /  / | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| ITEM | | CODE | | 1  Did the household consume any own produced ……….. in the past 12 months?  Yes… .1  No……2  Next Item | | | 2  How many months altogether was own produced ……….. consumed during the past 12 months? | | | 3  How much of own produced ……. was consumed by the household since my last visit?  (>> 9) | | | | 4  How much of own produced …….. was consumed by the household since my last visit? | | | | | 5  How much of own produced …….. was consumed by the household since my last visit? | | | | | | 6  How much of own produced ……. was consumed by the household since my last visit? | | | | 7  How much of own produced ……. was consumed by the household since my last visit? | | | | | 8  How much of own produced …….. was consumed by the household since my last visit? | | | | | | | | | 9  For how much would you sell one unit of …………..now?  **USE MOST OCCURING UNIT OF MEASURE** | | | |
| NO. OF MONTHS | | | QUAN-TITY | | | UNIT CODE | QUAN-TITY | | UNIT CODE | | | QUAN-TITY | | | | UNIT CODE | | QUAN-TITY | UNIT CODE | | | QUAN-TITY | UNIT CODE | | | | QUAN-TITY | | | | UNIT CODE | | | | | AMOUNT | | | |
| GH¢ | | GHp | |
| **OTHER LIVESTOCK PRODUCTS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Milk (fresh) | | | 081 | |  | | |  |  | | |  | |  |  | | |  | | |  | | |  | | |  |  | | |  |  | | | | |  | | | | |  | | | |  |
| **DRINKS AND BEVERAGES** | | | | | | | |  |  | | |  | |  |  | | |  | | |  | | |  | | |  |  | | |  |  | | | | |  | | | | |  | | | |  |
| Alcoholic beverages | | | 091 | |  | | |  |  | | |  | |  |  | | |  | | |  | | |  | | |  |  | | |  |  | | | | |  | | | | |  | | | |  |
| Non-alcoholic beverages | | | 092 | |  | | |  |  | | |  | |  |  | | |  | | |  | | |  | | |  |  | | |  |  | | | | |  | | | | |  | | | |  |

8.17

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES) NAME OF PERSON(S) RESPONSIBLE FOR PURCHASES PERSONS INTERVIEWED ID

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| PART A: NON-FOOD EXPENSES (LESS FREQUENTLY PURCHASED ITEMS) | |  |  |  |  | |  | | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| RESPONDENTS ARE THE PERSONS MAINLY RESPONSIBLE FOR | |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| HOUSEHOLD PURCHASES COPY FROM SECTION 6 Q.8 |  |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| I T E M | C  O  D  E | 1  Was anything spent by the household on ……in the past 12 months?  Yes…1  No….2  (>> 3) | 1a  Quantity | | 2  How much was spent on …………… in the past 12 months altogether? | 3  Has the household used, consumed out of its own output or has received as gift …...in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift in the past 12 months  (NEXT ITEM) |  | I T E M | C  O  D  E | 1  Was anything spent by the household on …… in the past 12 months?  Yes…1  No…..2  (>> 3) | 1a  Quantity | | | 2  How much was spent on ……………. in the past 12 months altogether? | 3  Has the household used, consumed out of its own output or has received as gift ….in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift?  (NEXT ITEM) | |
| QTY | UNIT | AMOUNT (GH¢) | QUAN-TITY | UNIT | VALUE (GH¢) | QTY | UNIT | | AMT (GH¢) | QUANTITY | UNIT | VALUE (GH¢) | |
| ***CLOTHING MATERIALS AND FOOTWEAR – CLOTHING MATERIALS*** | | | | | | |  |  |  | Dress material, imported (Holland) | 015 |  |  | |  |  |  |  |  | |
| Cloths: local (super and ordinary) | 001 |  |  |  |  |  |  |  |  | Dress material, imported (China) | 016 |  |  | |  |  |  |  |  |
| Imported (West Africa) | 002 |  |  |  |  |  |  |  |  | Dress material, imported (elsewhere) | 017 |  |  | |  |  |  |  |  |
| Imported (Hollande) | 003 |  |  |  |  |  |  |  |  | ***Clothing materials for children*** | |  |  | |  |  |  |  |  |
| Imported (China) | 004 |  |  |  |  |  |  |  |  | Dress material, (local - super & ordinary) | 019 |  |  | |  |  |  |  |  |
| Imported (elsewhere) | 005 |  |  |  |  |  |  |  |  | Dress material, imported (West Africa) | 020 |  |  | |  |  |  |  |  |
| ***Clothing materials for men*** |  |  |  |  |  |  |  |  |  | Dress material, imported (Holland) | 021 |  |  | |  |  |  |  |  |
| Dress material (local - super & ordinary) | 007 |  |  |  |  |  |  |  |  | Dress material, imported (China) | 022 |  |  | |  |  |  |  |  |
| Dress material, imported (West Africa) | 008 |  |  |  |  |  |  |  |  | Dress material, imported (elsewhere) | 023 |  |  | |  |  |  |  |  |
| Dress material, imported (Holland) | 009 |  |  |  |  |  |  |  |  | **Garments** |  |  |  | |  |  |  |  |  |
| Dress material, imported (China) | 010 |  |  |  |  |  |  |  |  | Kente (Men) | 025 |  |  | |  |  |  |  |  |
| Dress material, imported (elsewhere) | 011 |  |  |  |  |  |  |  |  | Kente (women) | 026 |  |  | |  |  |  |  |  |
| ***Clothing materials for women*** |  |  |  |  |  |  |  |  |  | ***Suit*** | 027 |  |  | |  |  |  |  |  |
| Dress material (local - super & ordinary) | 013 |  |  |  |  |  |  |  |  | Men | 028 |  |  | |  |  |  |  |  |
| Dress material, imported (West Africa) | 014 |  |  |  |  |  |  |  |  | women | 029 |  |  | |  |  |  |  |  |

9.1

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES) NAME OF PERSON(S) RESPONSIBLE FOR PURCHASES PERSONS INTERVIEWED ID

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| PART A: NON-FOOD EXPENSES (LESS FREQUENTLY PURCHASED ITEMS) | |  |  |  |  | |  | | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| RESPONDENTS ARE THE PERSONS MAINLY RESPONSIBLE FOR | |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| HOUSEHOLD PURCHASES COPY FROM SECTION 6 Q.8 |  |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| I T E M | C  O  D  E | 1  Was anything spent by the household on ……in the past 12 months?  Yes…1  No….2  (>> 3) | 1a  Quantity | | 2  How much was spent on …………… in the past 12 months altogether? | 3  Has the household used, consumed out of its own output or has received as gift …...in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift in the past 12 months  (NEXT ITEM) |  | I T E M | C  O  D  E | 1  Was anything spent by the household on …… in the past 12 months?  Yes…1  No…..2  (>> 3) | 1a  Quantity | | 2  How much was spent on ……………. in the past 12 months altogether? | 3  Has the household used, consumed out of its own output or has received as gift ….in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift?  (NEXT ITEM) |
| QTY | UNIT | AMT (GH¢) | QUAN-TITY | UNIT | VALUE (GH¢) | QTY | UNIT | AMT (GH¢) | QUANTITY | UNIT | VALUE (GH¢) |
| ***Ready made clothing for women*** | | | | | | |  |  |  | Girl's Dress | 055 |  |  | |  |  |  |  |
| Women's Blouse | 031 |  |  |  |  |  |  |  |  | Babies’ Bodysuit | 056 |  |  | |  |  |  |  |
| Women's Summer Pants(trousers) | 032 |  |  |  |  |  |  |  |  | ***Ready made clothing for men*** | | |  | |  |  |  |  |
| Women's Jacket/Blazer | 033 |  |  |  |  |  |  |  |  | Trousers | 058 |  |  | |  |  |  |  |
| Women’s Polyester Skirt | 034 |  |  |  |  |  |  |  |  | Shirts | 059 |  |  | |  |  |  |  |
| Women's Denim Skirt(jeans) | 035 |  |  |  |  |  |  |  |  | Men's T-shirt | 060 |  |  | |  |  |  |  |
| Women's Nightgown | 036 |  |  |  |  |  |  |  |  | Men's Shirt - Open front (long sleeves or short sleeves) | 061 |  |  | |  |  |  |  |
| Women's Bathrobe | 037 |  |  |  |  |  |  |  |  | Jeans jacket | 062 |  |  | |  |  |  |  |
| ***Women's Sportswear*** |  |  |  |  |  |  |  |  |  | Dress coat | 063 |  |  | |  |  |  |  |
| Track Suit | 039 |  |  |  |  |  |  |  |  | Shirt short sleeves | 064 |  |  | |  |  |  |  |
| Women's Pullover | 040 |  |  |  |  |  |  |  |  | Branded T-Shirt | 065 |  |  | |  |  |  |  |
| Ladies' straight trousers | 041 |  |  |  |  |  |  |  |  | Wax Design Shirt | 066 |  |  | |  |  |  |  |
| Raincoat | 042 |  |  |  |  |  |  |  |  | ***Shorts*** |  |  |  | |  |  |  |  |
| Cotton blouse | 043 |  |  |  |  |  |  |  |  | men | 068 |  |  | |  |  |  |  |
| Boubou | 044 |  |  |  |  |  |  |  |  | women | 069 |  |  | |  |  |  |  |
| Two pieces dress | 045 |  |  |  |  |  |  |  |  | ***Sports shirt*** |  |  |  | |  |  |  |  |
| Skirt | 046 |  |  |  |  |  |  |  |  | men | 071 |  |  | |  |  |  |  |
| ***Ready made clothing for children*** | | |  |  |  |  |  |  |  | women | 072 |  |  | |  |  |  |  |
| Boy's two piece dress | 048 |  |  |  |  |  |  |  |  | Jeans (men) | 073 |  |  | |  |  |  |  |
| Boy's Undershirt (singlet) | 049 |  |  |  |  |  |  |  |  | Jeans ( women) | 074 |  |  | |  |  |  |  |
| Boy's Shirt, Short Sleeves | 050 |  |  |  |  |  |  |  |  | Underwear women | 075 |  |  | |  |  |  |  |
| Boy's Shirt, long Sleeves | 051 |  |  |  |  |  |  |  |  | Underwear men | 076 |  |  | |  |  |  |  |
| Boy's Jogging Suit | 052 |  |  |  |  |  |  |  |  | Underwear children | 077 |  |  | |  |  |  |  |
| Boy's Underpants | 053 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |
| Girl’s Underpants | 054 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |

9.2

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES) NAME OF PERSON(S) RESPONSIBLE FOR PURCHASES PERSONS INTERVIEWED ID

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| PART A: NON-FOOD EXPENSES (LESS FREQUENTLY PURCHASED ITEMS) | |  |  |  |  | |  | | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| RESPONDENTS ARE THE PERSONS MAINLY RESPONSIBLE FOR | |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| HOUSEHOLD PURCHASES COPY FROM SECTION 6 Q.8 |  |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| I T E M | C  O  D  E | 1  Was anything spent by the household on ……in the past 12 months?  Yes…1  No….2  (>> 3) | 1a  Quantity | | 2  How much was spent on …………… in the past 12 months altogether? | 3  Has the household used, consumed out of its own output or has received as gift …...in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift in the past 12 months  (NEXT ITEM) |  | I T E M | C  O  D  E | 1  Was anything spent by the household on …… in the past 12 months?  Yes…1  No…..2  (>> 3) | 1a  Quantity | | 2  How much was spent on ……………. in the past 12 months altogether? | 3  Has the household used, consumed out of its own output or has received as gift ….in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift?  (NEXT ITEM) | |
| QTY | UNIT | AMOUNT (GH¢) | QUAN-TITY | UNIT | VALUE (GH¢) | QTY | UNIT | AMT (GH¢) | QUANTITY | UNIT | VALUE (GH¢) | |
| ***Second hand clothing*** |  |  |  |  |  |  |  |  |  | ***Cleaning, repair and hiring of clothing*** | | | |  |  |  |  |  | |
| Men | 079 |  |  |  |  |  |  |  |  | ***Women clothing*** | 101 |  |  |  |  |  |  |  |
| Women | 080 |  |  |  |  |  |  |  |  | Tailoring charges - African type suit | 102 |  |  |  |  |  |  |  |
| Children | 081 |  |  |  |  |  |  |  |  | Tailoring charges - European Style Suit | 103 |  |  |  |  |  |  |  |
| ***Uniform excluding school uniform*** | | |  |  |  |  |  |  |  | Tailoring charges - African dress – (Slit & Kaba) | 104 |  |  |  |  |  |  |  |
| Men | 083 |  |  |  |  |  |  |  |  | Tailoring charges - sleeveless dress | 105 |  |  |  |  |  |  |  |
| Women | 084 |  |  |  |  |  |  |  |  | Tailoring charges - local wear | 106 |  |  |  |  |  |  |  |
| Children | 085 |  |  |  |  |  |  |  |  | ***Men clothing*** |  |  |  |  |  |  |  |  |
| ***Smock*** |  |  |  |  |  |  |  |  |  | Tailoring charges - African type suit | 108 |  |  |  |  |  |  |  |
| Men | 087 |  |  |  |  |  |  |  |  | Tailoring charges - European Style Suit | 109 |  |  |  |  |  |  |  |
| Women | 088 |  |  |  |  |  |  |  |  | Tailoring charges - Simple trousers | 110 |  |  |  |  |  |  |  |
| Children | 089 |  |  |  |  |  |  |  |  | Tailoring charges - local wear | 111 |  |  |  |  |  |  |  |
| Other articles of clothing and clothing accessories | 093 |  |  |  |  |  |  |  |  | ***Children clothing*** | 112 |  |  |  |  |  |  |  |
| Handkerchief (women) | 094 |  |  |  |  |  |  |  |  | Tailoring charges - African type suit | 113 |  |  |  |  |  |  |  |
| Scarf (women) | 095 |  |  |  |  |  |  |  |  | Tailoring charges - European Style Suit | 114 |  |  |  |  |  |  |  |
| Handkerchief (men) | 096 |  |  |  |  |  |  |  |  | Tailoring charges - Lady's African dress - Two piece | 115 |  |  |  |  |  |  |  |
| Men’s Belt (leather or synthetic) | 097 |  |  |  |  |  |  |  |  | Tailoring charges - Lady's sleeveless dress | 116 |  |  |  |  |  |  |  |
| Men's Socks | 098 |  |  |  |  |  |  |  |  | Tailoring charges - local wear | 117 |  |  |  |  |  |  |  |
| Polyester tie | 099 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

9.3

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES) NAME OF PERSON(S) RESPONSIBLE FOR PURCHASES PERSONS INTERVIEWED ID

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| PART A: NON-FOOD EXPENSES (LESS FREQUENTLY PURCHASED ITEMS) | |  |  |  |  | |  | | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| RESPONDENTS ARE THE PERSONS MAINLY RESPONSIBLE FOR | |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| HOUSEHOLD PURCHASES COPY FROM SECTION 6 Q.8 |  |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| I T E M | C  O  D  E | | 1  Was anything spent by the household on ……in the past 12 months?  Yes…1  No….2  (>> 3) | 1a  Quantity | | 2  How much was spent on …………… in the past 12 months altogether? | 3  Has the household used, consumed out of its own output or has received as gift …...in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift in the past 12 months  (NEXT ITEM) |  | I T E M | C  O  D  E | 1  Was anything spent by the household on …… in the past 12 months?  Yes…1  No…..2  (>> 3) | 1a  Quantity | | | | 2  How much was spent on ……………. in the past 12 months altogether? | | 3  Has the household used, consumed out of its own output or has received as gift ….in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift?  (NEXT ITEM) | | |
| QTY | UNIT | AMOUNT (GH¢) | QUAN-TITY | UNIT | VALUE (GH¢) | QTY | | UNIT | | AMT (GH¢) | | QUANTITY | | UNIT | | VALUE (GH¢) | | |
| ***Other tailoring charges eg repairs*** |  | |  |  |  |  |  |  |  |  | **Foot Wear *- Footwear (Men)*** |  |  |  |  | |  | |  | |  | |  | |
| Tailoring charges - African type suit | 119 | |  |  |  |  |  |  |  |  | Sport shoes - brand imitations | 136 |  |  | |  | |  | |  | |  | |  | |
| Tailoring charges - European Style Suit | 120 | |  |  |  |  |  |  |  |  | Local Street sandals | 137 |  |  | |  | |  | |  | |  | |  | |
| Tailoring charges - Simple trousers | 121 | |  |  |  |  |  |  |  |  | Rubber Street sandals | 138 |  |  | |  | |  | |  | |  | |  | |
| Tailoring charges - Lady's African dress - Two piece | | 122 |  |  |  |  |  |  |  |  | Men's Dress Shoes | 139 |  |  | |  | |  | |  | |  | |  | |
| Tailoring charges - Lady's sleeveless dress | 123 | |  |  |  |  |  |  |  |  | Mens' long boots | 140 |  |  | |  | |  | |  | |  | |  | |
| Tailoring charges - local wear | 124 | |  |  |  |  |  |  |  |  | ***Footwear - Women*** |  |  |  | |  | |  | |  | |  | |  | |
| ***Laundry charges*** |  | |  |  |  |  |  |  |  |  | Sport shoes – brand imitations | 142 |  |  | |  | |  | |  | |  | |  | |
| Dry cleaning - cloth | 126 | |  |  |  |  |  |  |  |  | Local Street sandals (slippers) | 143 |  |  | |  | |  | |  | |  | |  | |
| Dry cleaning - trousers | 127 | |  |  |  |  |  |  |  |  | Plastic Street sandals | 144 |  |  | |  | |  | |  | |  | |  | |
| Dry cleaning - dress | 128 | |  |  |  |  |  |  |  |  | Women’s Dress Shoes | 145 |  |  | |  | |  | |  | |  | |  | |
| Dry cleaning - Ladies set of two pieces | 129 | |  |  |  |  |  |  |  |  | High Heel Shoes | 146 |  |  | |  | |  | |  | |  | |  | |
| Dry cleaning - other material | 130 | |  |  |  |  |  |  |  |  | ***Footwear - Children*** |  |  |  | |  | |  | |  | |  | |  | |
| ***Hiring of clothing*** |  | |  |  |  |  |  |  |  |  | Sport shoes – brand imitations | 148 |  |  | |  | |  | |  | |  | |  | |
| Men | 132 | |  |  |  |  |  |  |  |  | Local Street sandals | 149 |  |  | |  | |  | |  | |  | |  | |
| Women | 133 | |  |  |  |  |  |  |  |  | Rubber Street sandals | 150 |  |  | |  | |  | |  | |  | |  | |
| Children | 134 | |  |  |  |  |  |  |  |  | Children’s Dress Shoes | 151 |  |  | |  | |  | |  | |  | |  | |
|  |  | |  |  |  |  |  |  |  |  | Children’s long boots | 152 |  |  | |  | |  | |  | |  | |  | |
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9.4

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES) NAME OF PERSON(S) RESPONSIBLE FOR PURCHASES PERSONS INTERVIEWED ID

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| PART A: NON-FOOD EXPENSES (LESS FREQUENTLY PURCHASED ITEMS) | |  |  |  |  | |  | | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| RESPONDENTS ARE THE PERSONS MAINLY RESPONSIBLE FOR | |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| HOUSEHOLD PURCHASES COPY FROM SECTION 6 Q.8 |  |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| I T E M | C  O  D  E | | 1  Was anything spent by the household on ……in the past 12 months?  Yes…1  No….2  (>> 3) | 1a  Quantity | | 2  How much was spent on …………… in the past 12 months altogether? | 3  Has the household used, consumed out of its own output or has received as gift …...in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift in the past 12 months  (NEXT ITEM) |  | I T E M | C  O  D  E | | 1  Was anything spent by the household on …… in the past 12 months?  Yes…1  No…..2  (>> 3) | | 1a  Quantity | | | | 2  How much was spent on ……………. in the past 12 months altogether? | | 3  Has the household used, consumed out of its own output or has received as gift ….in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift?  (NEXT ITEM) |
| QTY | UNIT | AMOUNT (GH¢) | QUAN-TITY | UNIT | VALUE (GH¢) | QTY | | UNIT | | AMT (GH¢) | | QUANTITY | | UNIT | | VALUE (GH¢) |
| ***Second hand footwear*** |  | |  |  |  |  |  |  |  |  | Iron rods (1/4”) diameter | 171 |  | |  | |  | |  | |  | |  | |  | |
| Men | 154 | |  |  |  |  |  |  |  |  | Iron rods(3/8”) diameter | 172 | |  | |  | |  | |  | |  | |  | |  |
| Women | 155 | |  |  |  |  |  |  |  |  | Iron rods(1/2”) diameter | 173 | |  | |  | |  | |  | |  | |  | |  |
| Children | 156 | |  |  |  |  |  |  |  |  | Iron rods (3/4”) diameter | 174 | |  | |  | |  | |  | |  | |  | |  |
| ***Repairs of women footwear*** | |  |  |  |  |  |  |  |  |  | Iron rods (5/8”) diameter | 175 | |  | |  | |  | |  | |  | |  | |  |
| Shoe Repair – Women’s Street Shoes | 158 | |  |  |  |  |  |  |  |  | aluminum sheets | 176 | |  | |  | |  | |  | |  | |  | |  |
| Shoe Repair – Men’s Classic Shoes | 159 | |  |  |  |  |  |  |  |  | galvanized sheets | 177 | |  | |  | |  | |  | |  | |  | |  |
| Shoe Repair – Children’s Classic Shoes | 160 | |  |  |  |  |  |  |  |  | asbestos sheets | 178 | |  | |  | |  | |  | |  | |  | |  |
| Repair sandal | 161 | |  |  |  |  |  |  |  |  | ***Bricks and cement blocks*** |  | |  | |  | |  | |  | |  | |  | |  |
| Reinforcement Sole | 162 | |  |  |  |  |  |  |  |  | Bricks | 180 | |  | |  | |  | |  | |  | |  | |  |
| Replacement of heel for men | 163 | |  |  |  |  |  |  |  |  | ***cement blocks*** |  | |  | |  | |  | |  | |  | |  | |  |
| Replacement of heel for women | 164 | |  |  |  |  |  |  |  |  | Solid- 6 inches | 182 | |  | |  | |  | |  | |  | |  | |  |
| Shoe shine service charges | 165 | |  |  |  |  |  |  |  |  | Dust/quarry dust hullow -6 inches | 183 | |  | |  | |  | |  | |  | |  | |  |
| **Housing, water, electricity, gas and other fuels (excluding payments captured in Section 7)** | | | | | |  |  |  |  |  | Solid – 5 inches | 184 | |  | |  | |  | |  | |  | |  | |  |
| ***Materials for the maintenance and repairs of the dwelling*** | | | | | |  |  |  |  |  | Dust/quarry dust hullow – 5 inches | 185 | |  | |  | |  | |  | |  | |  | |  |
| Payment of rent (Excluding payment in sec7 for household) | 168 | |  |  |  |  |  |  |  |  | Solid- 4 inches | 186 | |  | |  | |  | |  | |  | |  | |  |
| ***Repairs to dwelling*** |  | |  |  |  |  |  |  |  |  |  |  | |  | |  | |  | |  | |  | |  | |  |
| Cement(minor repairs) | 170 | |  |  |  |  |  |  |  |  |  |  | |  | |  | |  | |  | |  | |  | |  |
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SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES) NAME OF PERSON(S) RESPONSIBLE FOR PURCHASES PERSONS INTERVIEWED ID

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| PART A: NON-FOOD EXPENSES (LESS FREQUENTLY PURCHASED ITEMS) | |  |  |  |  | |  | | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| RESPONDENTS ARE THE PERSONS MAINLY RESPONSIBLE FOR | |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| HOUSEHOLD PURCHASES COPY FROM SECTION 6 Q.8 |  |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| I T E M | C  O  D  E | | 1  Was anything spent by the household on ……in the past 12 months?  Yes…1  No….2  (>> 3) | | 1a  Quantity | | | | 2  How much was spent on …………… in the past 12 months altogether? | | 3  Has the household used, consumed out of its own output or has received as gift …...in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift in the past 12 months  (NEXT ITEM) | |  | | I T E M | | C  O  D  E | | | 1  Was anything spent by the household on …… in the past 12 months?  Yes…1  No…..2  (>> 3) | | | 1a  Quantity | | | | | 2  How much was spent on ……………. In the past 12 months altogether? | | 3  Has the household used, consumed out of its own output or has received as gift ….in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift?  (NEXT ITEM) | | |
| QTY | | UNIT | | AMOUNT (GH¢) | | QUAN-TITY | | UNIT | | VALUE (GH¢) | | QTY | | | UNIT | | AMT (GH¢) | | QUANTITY | | UNIT | | VALUE (GH¢) | | |
| ***Paints including quicklime*** |  | |  | |  | |  | |  | |  | |  | |  | |  | | Metal | | | 210 | | |  | | |  | |  | |  | |  | |  | |  | | |
| ***Paints*** |  | |  | |  | |  | |  | |  | |  | |  | |  | | Windows | | 211 | | |  | | |  | | |  | |  | |  | |  | |  | |
| Leyland Emulsion | 189 | |  | |  | |  | |  | |  | |  | |  | |  | | Other Materials (specify) | | 212 | | |  | | |  | | |  | |  | |  | |  | |  | |
| Leyland oil | 190 | |  | |  | |  | |  | |  | |  | |  | |  | | Labour | | 213 | | |  | | |  | | |  | |  | |  | |  | |  | |
| Azargloss Emulsion | 191 |  | |  | |  | |  | |  | |  | |  | |  | | Other Minor Repairs To The Dwelling | | 214 | | |  | | |  | | |  | |  | |  | |  | |  | |
| Azargloss oil | 192 | |  | |  | |  | |  | |  | |  | |  | |  | | ***Services for regular maintenance for repair of dwelling (not captured in sec7)*** | | | | | | | | | | | | | | |  | |  | |  | |
| Quicklime | 193 | |  | |  | |  | |  | |  | |  | |  | |  | | Plumbing Services | | 216 | | |  | | |  | | |  | |  | |  | |  | |  | |
| Savannah Emulsion | 194 | |  | |  | |  | |  | |  | |  | |  | |  | | Electricals Services | | 217 | | |  | | |  | | |  | |  | |  | |  | |  | |
| Suvinil Emulsion | 195 | |  | |  | |  | |  | |  | |  | |  | |  | | Carpentary Services | | 218 | | |  | | |  | | |  | |  | |  | |  | |  | |
| Coral Emulsion | 196 | |  | |  | |  | |  | |  | |  | |  | |  | | Ice block (household cooling and refrigeration only) | | 219 | | |  | | |  | | |  | |  | |  | |  | |  | |
| Other paint (specify) | 197 | |  | |  | |  | |  | |  | |  | |  | |  | | Other water | | 220 | | |  | | |  | | |  | |  | |  | |  | |  | |
| ***Wood, doors and windows*** |  | |  | |  | |  | |  | |  | |  | |  | |  | | Refuse disposal | | 221 | | |  | | |  | | |  | |  | |  | |  | |  | |
| ***Wood*** |  | |  | |  | |  | |  | |  | |  | |  | |  | | Sewage removal | | 222 | | |  | | |  | | |  | |  | |  | |  | |  | |
| Sapele | 200 | |  | |  | |  | |  | |  | |  | |  | |  | | Toilet | | 223 | | |  | | |  | | |  | |  | |  | |  | |  | |
| Mahogany | 201 | |  | |  | |  | |  | |  | |  | |  | |  | | **ELECTRICITY GAS AND OTHER FUELS** | | | | | | | |  | | |  | |  | |  | |  | |  | |
| Wawa | 202 | |  | |  | |  | |  | |  | |  | |  | |  | | Electricity (excluding bill in sec7) | | 225 | | |  | | |  | | |  | |  | |  | |  | |  | |
| Ofram | 203 | |  | |  | |  | |  | |  | |  | |  | |  | | Gas for household use – 14.5Kg | | 226 | | |  | | |  | | |  | |  | |  | |  | |  | |
| Odum | 204 | |  | |  | |  | |  | |  | |  | |  | |  | | Gas for household use – 5Kg | | 227 | | |  | | |  | | |  | |  | |  | |  | |  | |
| ***Doors*** | 205 | |  | |  | |  | |  | |  | |  | |  | |  | | Kerosene | | 228 | | |  | | |  | | |  | |  | |  | |  | |  | |
| Panel | 206 | |  | |  | |  | |  | |  | |  | |  | |  | | Other fuel and power | | 229 | | |  | | |  | | |  | |  | |  | |  | |  | |
| Plain | 207 | |  | |  | |  | |  | |  | |  | |  | |  | | Charcoal – Maxibag | | 230 | | |  | | |  | | |  | |  | |  | |  | |  | |
| Sliding Door | 208 | |  | |  | |  | |  | |  | |  | |  | |  | | Charcoal – Minibag | | 231 | | |  | | |  | | |  | |  | |  | |  | |  | |
| Other (specify) | 209 | |  | |  | |  | |  | |  | |  | |  | |  | | Firewood | | 232 | | |  | | |  | | |  | |  | |  | |  | |  | |

9.6

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES) NAME OF PERSON(S) RESPONSIBLE FOR PURCHASES PERSONS INTERVIEWED ID

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| PART A: NON-FOOD EXPENSES (LESS FREQUENTLY PURCHASED ITEMS) | |  |  |  |  | |  | | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| RESPONDENTS ARE THE PERSONS MAINLY RESPONSIBLE FOR | |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| HOUSEHOLD PURCHASES COPY FROM SECTION 6 Q.8 |  |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| I T E M | C  O  D  E | | 1  Was anything spent by the household on ……in the past 12 months?  Yes…1  No….2  (>> 3) | | 1a  Quantity | | | | 2  How much was spent on …………… in the past 12 months altogether? | | 3  Has the household used, consumed out of its own output or has received as gift …...in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift in the past 12 months  (NEXT ITEM) | |  | | I T E M | | C  O  D  E | | 1  Was anything spent by the household on …… in the past 12 months?  Yes…1  No…..2  (>> 3) | | 1a  Quantity | | | | | | 2  How much was spent on ……………. in the past 12 months altogether? | | | 3  Has the household used, consumed out of its own output or has received as gift ….in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | | | | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift?  (NEXT ITEM) | | |
| QTY | | UNIT | | AMOUNT (GH¢) | | QUAN-TITY | | UNIT | | VALUE (GH¢) | | QTY | | | UNIT | | | AMT (GH¢) | | | QUANTITY | | | UNIT | | | VALUE (GH¢) | | |
| **FURNISHINGS, HOUSEHOLD EQUIPMENT AND ROUTINE MAINTENANCE** | | | | | | | | | | | | |  | |  | |  | |  | |  | |  | |  |  | | |  | | |  | | |  | | |  | | |
| ***Bedsteads*** |  | |  | |  | |  | |  | |  | |  | |  | |  | | Vinyl floor covering | | 251 | |  | |  | | |  | | |  | | |  | | |  | | |  | |
| Simple Double Bed | 235 | |  | |  | |  | |  | |  | |  | |  | |  | | Polypropylene Carpet | | 252 | |  | |  | | |  | | |  | | |  | | |  | | |  | |
| Simple Single Bed | 236 | |  | |  | |  | |  | |  | |  | |  | |  | | Upholstery of sofa | | 253 | |  | |  | | |  | | |  | | |  | | |  | | |  | |
| ***Mattresses*** |  |  | |  | |  | |  | |  | |  | |  | |  | | Covering the seat of padded chair | | 254 | |  | |  | | |  | | |  | | |  | | |  | | |  | |
| Foam Mattress 20 cm-Thick for double bed | 238 | |  | |  | |  | |  | |  | |  | |  | |  | | Repairs of tables and chairs | | 255 | |  | |  | | |  | | |  | | |  | | |  | | |  | |
| Spring mattress (Single) | 239 | |  | |  | |  | |  | |  | |  | |  | |  | | Other repairs of furniture furnishing and floor coverings | | 256 | |  | |  | | |  | | |  | | |  | | |  | | |  | |
| Room furniture | 240 | |  | |  | |  | |  | |  | |  | |  | |  | | Bedsheets and blankets | | 257 | |  | |  | | |  | | |  | | |  | | |  | | |  | |
| ***Other furniture and furnishings items*** |  | |  | |  | |  | |  | |  | |  | |  | |  | | Bed sheet (cotton) double bed | | 258 | |  | |  | | |  | | |  | | |  | | |  | | |  | |
| Kitchen table | 242 | |  | |  | |  | |  | |  | |  | |  | |  | | Bed sheet (cotton) single bed | | 259 | |  | |  | | |  | | |  | | |  | | |  | | |  | |
| Kitchen chair | 243 | |  | |  | |  | |  | |  | |  | |  | |  | | Blanket, polyester - Single | | 260 | |  | |  | | |  | | |  | | |  | | |  | | |  | |
| Chest of Drawers (3 pull out drawers) | 244 | |  | |  | |  | |  | |  | |  | |  | |  | | Blanket, polyester - Double | | 261 | |  | |  | | |  | | |  | | |  | | |  | | |  | |
| Two doors wardrobe | 245 | |  | |  | |  | |  | |  | |  | |  | |  | | Towels | | 262 | |  | |  | | |  | | |  | | |  | | |  | | |  | |
| Plastic Table | 246 | |  | |  | |  | |  | |  | |  | |  | |  | | ***Other household textile*** | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |
| Plastic Chair | 247 | |  | |  | |  | |  | |  | |  | |  | |  | | Curtain material | | 264 | |  | |  | | |  | | |  | | |  | | |  | | |  | |
| Floor mat (tiles) | 248 | |  | |  | |  | |  | |  | |  | |  | |  | | Furniture material | | 265 | |  | |  | | |  | | |  | | |  | | |  | | |  | |
| Linoleum | 249 | |  | |  | |  | |  | |  | |  | |  | |  | | Table cloth material | | 266 | |  | |  | | |  | | |  | | |  | | |  | | |  | |
| Wollen carpets | 250 | |  | |  | |  | |  | |  | |  | |  | |  | | Tablecloth | | 267 | |  | |  | | |  | | |  | | |  | | |  | | |  | |
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9.7

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES) NAME OF PERSON(S) RESPONSIBLE FOR PURCHASES PERSONS INTERVIEWED ID

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| PART A: NON-FOOD EXPENSES (LESS FREQUENTLY PURCHASED ITEMS) | |  |  |  |  | |  | | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| RESPONDENTS ARE THE PERSONS MAINLY RESPONSIBLE FOR | |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| HOUSEHOLD PURCHASES COPY FROM SECTION 6 Q.8 |  |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| I T E M | C  O  D  E | | 1  Was anything spent by the household on ……in the past 12 months?  Yes…1  No….2  (>> 3) | 1a  Quantity | | 2  How much was spent on …………… in the past 12 months altogether? | 3  Has the household used, consumed out of its own output or has received as gift …...in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift in the past 12 months  (NEXT ITEM) |  | I T E M | C  O  D  E | 1  Was anything spent by the household on …… in the past 12 months?  Yes…1  No…..2  (>> 3) | 1a  Quantity | | | | 2  How much was spent on ……………. in the past 12 months altogether? | | 3  Has the household used, consumed out of its own output or has received as gift ….in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift?  (NEXT ITEM) | | |
| QTY | UNIT | AMOUNT (GH¢) | QUAN-TITY | UNIT | VALUE (GH¢) | QTY | | UNIT | | AMT (GH¢) | | QUANTITY | | UNIT | | VALUE (GH¢) | | |
| ***Major household appliances- Refrigerators and freezers*** | | | | | |  |  |  |  |  | ***Other tools and equipment for house and garden*** | | |  |  | |  | |  | |  | |  | |
| Refrigerator-freezer, 210-245 Liters | 269 | |  |  |  |  |  |  |  |  | Electric sewing machine | 288 |  |  | |  | |  | |  | |  | |  | |
| Refrigerator-freezer, low, 165-190 Liters | 270 | |  |  |  |  |  |  |  |  | **Small electric household appliances** | | |  | |  | |  | |  | |  | |  | |
| Refrigerator with Freezer Compartment | 271 | |  |  |  |  |  |  |  |  | Electric Kettle | 290 |  |  | |  | |  | |  | |  | |  | |
| ***Washing machines and driers*** | |  |  |  |  |  |  |  |  |  | ***Electric irons*** |  |  |  | |  | |  | |  | |  | |  | |
| Washing machine (Front loader) | 273 | |  |  |  |  |  |  |  |  | Steam Iron | 292 |  |  | |  | |  | |  | |  | |  | |
| Washing machine (Top loader) | 274 | |  |  |  |  |  |  |  |  | Electric Iron- dry | 293 |  |  | |  | |  | |  | |  | |  | |
| Dishwasher | 275 | |  |  |  |  |  |  |  |  | ***Electric fans*** |  |  |  | |  | |  | |  | |  | |  | |
| Vacuum cleaner | 276 | |  |  |  |  |  |  |  |  | Pedestal Fan | 295 |  |  | |  | |  | |  | |  | |  | |
| ***Air conditioners and air coolers*** |  | |  |  |  |  |  |  |  |  | Table Fan (Desk Fan) | 296 |  |  | |  | |  | |  | |  | |  | |
| Air conditioner - Split chassis (Cool) | 278 | |  |  |  |  |  |  |  |  | ***Other small electric household appliances*** | |  |  | |  | |  | |  | |  | |  | |
| ***Gas cookers, stoves and coalpots*** | | |  |  |  |  |  |  |  |  | Blenders | 298 |  |  | |  | |  | |  | |  | |  | |
| Gas stove, with oven | 280 | |  |  |  |  |  |  |  |  | Lanterns, gas lights | 299 |  |  | |  | |  | |  | |  | |  | |
| Gas stove, 2 burners | 281 | |  |  |  |  |  |  |  |  | Hand mixer | 300 |  |  | |  | |  | |  | |  | |  | |
| Coalpots | 282 | |  |  |  |  |  |  |  |  | Toaster | 301 |  |  | |  | |  | |  | |  | |  | |
| ***Other major household appliances*** | | |  |  |  |  |  |  |  |  | ***Repair of household appliances*** |  |  |  | |  | |  | |  | |  | |  | |
| Microwave Oven | 284 | |  |  |  |  |  |  |  |  | Repairs to household appliances | 303 |  |  | |  | |  | |  | |  | |  | |
| Generators (household use) | 285 | |  |  |  |  |  |  |  |  | Repair of washing machine | 304 |  |  | |  | |  | |  | |  | |  | |
| Other (specify) | 286 | |  |  |  |  |  |  |  |  | Air conditioner repair | 305 |  |  | |  | |  | |  | |  | |  | |

9.8

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES) NAME OF PERSON(S) RESPONSIBLE FOR PURCHASES PERSONS INTERVIEWED ID

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| PART A: NON-FOOD EXPENSES (LESS FREQUENTLY PURCHASED ITEMS) | |  |  |  |  | |  | | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| RESPONDENTS ARE THE PERSONS MAINLY RESPONSIBLE FOR | |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| HOUSEHOLD PURCHASES COPY FROM SECTION 6 Q.8 |  |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| I T E M | C  O  D  E | | 1  Was anything spent by the household on ……in the past 12 months?  Yes…1  No….2  (>> 3) | 1a  Quantity | | 2  How much was spent on …………… in the past 12 months altogether? | 3  Has the household used, consumed out of its own output or has received as gift …...in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift in the past 12 months  (NEXT ITEM) |  | I T E M | C  O  D  E | 1  Was anything spent by the household on …… in the past 12 months?  Yes…1  No…..2  (>> 3) | | 1a  Quantity | | | 2  How much was spent on ……………. in the past 12 months altogether? | 3  Has the household used, consumed out of its own output or has received as gift ….in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift?  (NEXT ITEM) | |
| QTY | UNIT | AMOUNT (GH¢) | QUAN-TITY | UNIT | VALUE (GH¢) | QTY | | UNIT | AMT (GH¢) | QUANTITY | UNIT | VALUE (GH¢) | |
| ***Glassware, Tableware and Household Utensils*** | | | | |  |  |  |  |  |  | ***Small Tools and Miscellaneous accessories*** | | |  | |  |  |  |  |  |  | |
| Cups | 307 | |  |  |  |  |  |  |  |  | Cutlasses | 324 |  | |  | |  |  |  |  |  |
| Plates | 308 | |  |  |  |  |  |  |  |  | shovels | 325 |  | |  | |  |  |  |  |  |
| Dining pots/utensils | 309 | |  |  |  |  |  |  |  |  | Rakes | 326 |  | |  | |  |  |  |  |  |
| Cutleries | | 310 |  |  |  |  |  |  |  |  | Wheelbarrow | 327 |  | |  | |  |  |  |  |  |
| Aluminium cooking utensils (local) | 311 | |  |  |  |  |  |  |  |  | ***Light bulbs*** |  |  | |  | |  |  |  |  |  |
| Aluminium cooking utensils (lmported) | 312 | |  |  |  |  |  |  |  |  | Incandescent light bulb | 329 |  | |  | |  |  |  |  |  |
| Other cooking pots /utensils | 313 | |  |  |  |  |  |  |  |  | Energy Saving Light Bulb | 330 |  | |  | |  |  |  |  |  |
| Other glassware, tableware and utensils | 314 | |  |  |  |  |  |  |  |  | Fluorescent bulbs | 331 |  | |  | |  |  |  |  |  |
| Non-stick frying pan | 315 | |  |  |  |  |  |  |  |  | ***Other lighting products*** |  |  | |  | |  |  |  |  |  |
| Bucket | 316 | |  |  |  |  |  |  |  |  | Torches | 333 |  | |  | |  |  |  |  |  |
| Rolling pin | 317 | |  |  |  |  |  |  |  |  | AA Alkaline Batteries | 334 |  | |  | |  |  |  |  |  |
| Jug | 318 | |  |  |  |  |  |  |  |  | ***Other small tools and miscellaneous accessories*** |  |  | |  | |  |  |  |  |  |
| ***Major Tools and equipment for house and Garden*** |  | |  |  |  |  |  |  |  |  | Padlock | 336 |  | |  | |  |  |  |  |  |
| Motor driven lawn mower | 320 | |  |  |  |  |  |  |  |  | **Goods and services for routine household maintenance** |  |  | |  | |  |  |  |  |  |
| Water cans | 321 | |  |  |  |  |  |  |  |  | Brooms | 338 |  | |  | |  |  |  |  |  |
| Water pumps | 322 | |  |  |  |  |  |  |  |  | Mop, with handle | 339 |  | |  | |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |  |  | Other (specify) | 340 |  | |  | |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |  |  | Hand drier | 341 |  | |  | |  |  |  |  |  |

9.9

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES) NAME OF PERSON(S) RESPONSIBLE FOR PURCHASES PERSONS INTERVIEWED ID

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| PART A: NON-FOOD EXPENSES (LESS FREQUENTLY PURCHASED ITEMS) | |  |  |  |  | |  | | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| HOUSEHOLD PURCHASES COPY FROM SECTION 6 Q.8 |  |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| I T E M | C  O  D  E | | 1  Was anything spent by the household on ……in the past 12 months?  Yes…1  No….2  (>> 3) | | 1a  Quantity | | | | 2  How much was spent on …………… in the past 12 months altogether? | | 3  Has the household used, consumed out of its own output or has received as gift …...in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift in the past 12 months  (NEXT ITEM) | |  | | I T E M | | C  O  D  E | | | 1  Was anything spent by the household on …… in the past 12 months?  Yes…1  No…..2  (>> 3) | | | 1a  Quantity | | | | | 2  How much was spent on ……………. in the past 12 months altogether? | | 3  Has the household used, consumed out of its own output or has received as gift ….in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift?  (NEXT ITEM) | | | |
| QTY | | UNIT | | AMOUNT (GH¢) | | QUAN-TITY | | UNIT | | VALUE (GH¢) | | QTY | | | UNIT | | AMT (GH¢) | | QUANTITY | | UNIT | | VALUE (GH¢) | | | |
| ***Domestic and household services*** | | | |  | |  | |  | |  | |  | |  | |  | | ***Outpatient Services-Medical Services*** | | | |  | | |  | | |  |  | |  | |  | |  | |  | | |
| House boys/house maids | 342 | |  | |  | |  | |  | |  | |  | |  | |  | | Doctors consulting fee:Public hospital | | 358 | | |  | | |  | | |  | |  | |  | |  | |  | | |
| Housekeepers/caretakers | 343 | |  | |  | |  | |  | |  | |  | |  | |  | | Urologist: Consultation | | 359 | | |  | | |  | | |  | |  | |  | |  | |  | | |
| Baby sitters,day care attendants, nannies etc | 344 | |  | |  | |  | |  | |  | |  | |  | |  | | Gynecologist: Consultation | | 360 | | |  | | |  | | |  | |  | |  | |  | |  | | |
| Lawn boys/gardeners | 345 |  | |  | |  | |  | |  | |  | |  | |  | | Consultation with a pediatrician medical practitioner | | 361 | | |  | | |  | | |  | |  | |  | |  | |  | |
| Security guards | 346 | |  | |  | |  | |  | |  | |  | |  | |  | | Doctors consulting fee: Private hospital | | 362 | | |  | | |  | | |  | |  | |  | |  | |  | | |
| **HEALTH** |  | |  | |  | |  | |  | |  | |  | |  | |  | | ***Dental services*** | |  | | |  | | |  | | |  | |  | |  | |  | |  | | |
| ***Other Medical Products*** |  | |  | |  | |  | |  | |  | |  | |  | |  | | ***Cost of public dental services*** | |  | | |  | | |  | | |  | |  | |  | |  | |  | | |
| Digital therapeutical thermometer | 349 | |  | |  | |  | |  | |  | |  | |  | |  | | Dentist: Extraction of a tooth | | 365 | | |  | | |  | | |  | |  | |  | |  | |  | | |
| Soft contact lenses | 350 | |  | |  | |  | |  | |  | |  | |  | |  | | Dentist: Filling | | 366 | | |  | | |  | | |  | |  | |  | |  | |  | | |
| Walking stick | 351 | |  | |  | |  | |  | |  | |  | |  | |  | | Cost of private dental services | | 367 | | |  | | |  | | |  | |  | |  | |  | |  | | |
| Automatic blood pressure monitor - upper arm | 352 | |  | |  | |  | |  | |  | |  | |  | |  | | ***Paramedical services*** | |  | | |  | | |  | | |  | |  | |  | |  | |  | | |
| ***Therapeutic appliances and equipment*** | | | |  | |  | |  | |  | |  | |  | |  | | Traditional healer | | 369 | | |  | | |  | | |  | |  | |  | |  | |  | |
| Therapeutic appliances & equipment | 354 | |  | |  | |  | |  | |  | |  | |  | |  | | ***Laboratory test*** | |  | | |  | | |  | | |  | |  | |  | |  | |  | | |
| Eye specialist (Ophthalmologist): Sight test examination | 355 | |  | |  | |  | |  | |  | |  | |  | |  | | Standard blood test (private) | | 371 | | |  | | |  | | |  | |  | |  | |  | |  | | |
| Corrective eye-glasses & contact lenses | 356 | |  | |  | |  | |  | |  | |  | |  | |  | | Urine test | | 372 | | |  | | |  | | |  | |  | |  | |  | |  | | |
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SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES) NAME OF PERSON(S) RESPONSIBLE FOR PURCHASES PERSONS INTERVIEWED ID

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| PART A: NON-FOOD EXPENSES (LESS FREQUENTLY PURCHASED ITEMS) | |  |  |  |  | |  | | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| RESPONDENTS ARE THE PERSONS MAINLY RESPONSIBLE FOR | |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| HOUSEHOLD PURCHASES COPY FROM SECTION 6 Q.8 |  |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| I T E M | C  O  D  E | | 1  Was anything spent by the household on ……in the past 12 months?  Yes…1  No….2  (>> 3) | 1a  Quantity | | 2  How much was spent on …………… in the past 12 months altogether? | 3  Has the household used, consumed out of its own output or has received as gift …...in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift in the past 12 months  (NEXT ITEM) |  | I T E M | C  O  D  E | 1  Was anything spent by the household on …… in the past 12 months?  Yes…1  No…..2  (>> 3) | 1a  Quantity | | | | 2  How much was spent on ……………. in the past 12 months altogether? | | 3  Has the household used, consumed out of its own output or has received as gift ….in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift?  (NEXT ITEM) | | |
| QTY | UNIT | AMOUNT (GH¢) | QUAN-TITY | UNIT | VALUE (GH¢) | QTY | | UNIT | | AMT (GH¢) | | QUANTITY | | UNIT | | VALUE (GH¢) | | |
| Mammogram | 373 | |  |  |  |  |  |  |  |  | ***Tricycles*** |  |  |  |  | |  | |  | |  | |  | |
| X-rays | 374 | |  |  |  |  |  |  |  |  | Purchase of new tricycles | 392 |  |  | |  | |  | |  | |  | |  | |
| Services of midwives, nurses, etc | 375 | |  |  |  |  |  |  |  |  | Purchase of second-hand tricycle | 393 |  |  | |  | |  | |  | |  | |  | |
| Traditional birth attendant (TBA) services | 376 | |  |  |  |  |  |  |  |  | ***Bicycles*** |  |  |  | |  | |  | |  | |  | |  | |
| Physiotherapist: Complete treatment sessions | | 377 |  |  |  |  |  |  |  |  | Purchase of new bicycles | 395 |  |  | |  | |  | |  | |  | |  | |
| ***Hospital services*** |  | |  |  |  |  |  |  |  |  | Purchase of second-hand bicycle | 396 |  |  | |  | |  | |  | |  | |  | |
| Surgery in public hospitals | 380 | |  |  |  |  |  |  |  |  | ***Animal drawn cart*** |  |  |  | |  | |  | |  | |  | |  | |
| surgery in private hospitals | 381 | |  |  |  |  |  |  |  |  | Animal drawn cart | 398 |  |  | |  | |  | |  | |  | |  | |
| Other in patient hospital services | 382 | |  |  |  |  |  |  |  |  | ***Spare parts and accessories for personal transport equipment*** |  |  |  | |  | |  | |  | |  | |  | |
| **TRANSPORT - Purchase of vehicles** | | |  |  |  |  |  |  |  |  | ***Purchase of car tyre*** |  |  |  | |  | |  | |  | |  | |  | |
| Purchase of new cars (specify) | 384 | |  |  |  |  |  |  |  |  | Tyre R14 | 401 |  |  | |  | |  | |  | |  | |  | |
| Purchase of new truck | 385 | |  |  |  |  |  |  |  |  | Tyre R15 | 402 |  |  | |  | |  | |  | |  | |  | |
| Purchase of second hand cars (specify) | 386 | |  |  |  |  |  |  |  |  | Other tyre rim | 403 |  |  | |  | |  | |  | |  | |  | |
| Purchase of second hand truck | 387 | |  |  |  |  |  |  |  |  | ***Purchase of spark plugs, batteries, oil filters etc*** |  |  |  | |  | |  | |  | |  | |  | |
| ***Motor Cycles*** |  | |  |  |  |  |  |  |  |  | Car Battery - Bosch | 405 |  |  | |  | |  | |  | |  | |  | |
| Purchase of new motorcycles (specify) | 389 | |  |  |  |  |  |  |  |  | Car Battery - Boliden | 406 |  |  | |  | |  | |  | |  | |  | |
| Purchase of second-hand motorcycle (specify) | 390 | |  |  |  |  |  |  |  |  | Car Battery - Ganiva | 407 |  |  | |  | |  | |  | |  | |  | |
|  |  | |  |  |  |  |  |  |  |  | Car Battery - Visca | 408 |  |  | |  | |  | |  | |  | |  | |
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9.11

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES) NAME OF PERSON(S) RESPONSIBLE FOR PURCHASES PERSONS INTERVIEWED ID

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| PART A: NON-FOOD EXPENSES (LESS FREQUENTLY PURCHASED ITEMS) | |  |  |  |  | |  | | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| RESPONDENTS ARE THE PERSONS MAINLY RESPONSIBLE FOR | |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| HOUSEHOLD PURCHASES COPY FROM SECTION 6 Q.8 |  |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| I T E M | C  O  D  E | | 1  Was anything spent by the household on ……in the past 12 months?  Yes…1  No….2  (>> 3) | 1a  Quantity | | 2  How much was spent on …………… in the past 12 months altogether? | 3  Has the household used, consumed out of its own output or has received as gift …...in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift in the past 12 months  (NEXT ITEM) |  | I T E M | C  O  D  E | 1  Was anything spent by the household on …… in the past 12 months?  Yes…1  No…..2  (>> 3) | 1a  Quantity | | | | 2  How much was spent on ……………. in the past 12 months altogether? | | 3  Has the household used, consumed out of its own output or has received as gift ….in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift?  (NEXT ITEM) | | |
| QTY | UNIT | AMOUNT (GH¢) | QUAN-TITY | UNIT | VALUE (GH¢) | QTY | | UNIT | | AMT (GH¢) | | QUANTITY | | UNIT | | VALUE (GH¢) | | |
| Car Battery - Other | 409 | |  |  |  |  |  |  |  |  | Road worthy fees | 428 |  |  |  | |  | |  | |  | |  | |
| Spark plug | 410 | |  |  |  |  |  |  |  |  | Vehicle registration | 429 |  |  | |  | |  | |  | |  | |  | |
| Oil filter | 411 | |  |  |  |  |  |  |  |  | ***Passenger transport by air - Cost of travel by air*** | | |  | |  | |  | |  | |  | |  | |
| Fuel filter | 412 | |  |  |  |  |  |  |  |  | International Flight One Way | 431 |  |  | |  | |  | |  | |  | |  | |
| Other spare parts (specify) | | 413 |  |  |  |  |  |  |  |  | International Flight Two Way | 432 |  |  | |  | |  | |  | |  | |  | |
| **Fuels and lubricants for personal transport equipment** |  | |  |  |  |  |  |  |  |  | ***COMMUNICATION*** |  |  |  | |  | |  | |  | |  | |  | |
| Engine oils | 415 | |  |  |  |  |  |  |  |  | Postal services | 434 |  |  | |  | |  | |  | |  | |  | |
| Lubricants | 416 | |  |  |  |  |  |  |  |  | Other communication charges | 435 |  |  | |  | |  | |  | |  | |  | |
| ***Maintenance and repair of personal transport equipment*** |  | |  |  |  |  |  |  |  |  | ***Telephone and telefax equipment*** |  |  |  | |  | |  | |  | |  | |  | |
| Wheel alignment | 418 | |  |  |  |  |  |  |  |  | Telephones handset | 437 |  |  | |  | |  | |  | |  | |  | |
| Services, garage (mechanic) | 419 | |  |  |  |  |  |  |  |  | Corded (specify) | 438 |  |  | |  | |  | |  | |  | |  | |
| Tyre repair | 420 | |  |  |  |  |  |  |  |  | Cordless (specify) | 439 |  |  | |  | |  | |  | |  | |  | |
| Clutch repair | 421 | |  |  |  |  |  |  |  |  | ***Mobile phones*** |  |  |  | |  | |  | |  | |  | |  | |
| Brake repair | 422 | |  |  |  |  |  |  |  |  | Infinix | 441 |  |  | |  | |  | |  | |  | |  | |
| ***Other services in respect of personal transport equipment*** |  | |  |  |  |  |  |  |  |  | Tecno | 442 |  |  | |  | |  | |  | |  | |  | |
| ***Washing/parking spaces services*** |  | |  |  |  |  |  |  |  |  | Nokia | 443 |  |  | |  | |  | |  | |  | |  | |
| Car hire, Hertz/Avis | 425 | |  |  |  |  |  |  |  |  | Samsung | 444 |  |  | |  | |  | |  | |  | |  | |
| Car hire, well-known | 426 | |  |  |  |  |  |  |  |  | Apple Iphone | 445 |  |  | |  | |  | |  | |  | |  | |
| Drivers license fees | 427 | |  |  |  |  |  |  |  |  | LG | 446 |  |  | |  | |  | |  | |  | |  | |

9.12

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES) NAME OF PERSON(S) RESPONSIBLE FOR PURCHASES PERSONS INTERVIEWED ID

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| PART A: NON-FOOD EXPENSES (LESS FREQUENTLY PURCHASED ITEMS) | |  |  |  |  | |  | | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| RESPONDENTS ARE THE PERSONS MAINLY RESPONSIBLE FOR | |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| HOUSEHOLD PURCHASES COPY FROM SECTION 6 Q.8 |  |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| I T E M | C  O  D  E | | 1  Was anything spent by the household on ……in the past 12 months?  Yes…1  No….2  (>> 3) | 1a  Quantity | | 2  How much was spent on …………… in the past 12 months altogether? | 3  Has the household used, consumed out of its own output or has received as gift …...in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift in the past 12 months  (NEXT ITEM) |  | I T E M | C  O  D  E | 1  Was anything spent by the household on …… in the past 12 months?  Yes…1  No…..2  (>> 3) | 1a  Quantity | | 2  How much was spent on ……………. in the past 12 months altogether? | 3  Has the household used, consumed out of its own output or has received as gift ….in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift?  (NEXT ITEM) | |
| QTY | UNIT | AMOUNT (GH¢) | QUAN-TITY | UNIT | VALUE (GH¢) | QTY | UNIT | AMT (GH¢) | QUANTITY | UNIT | VALUE (GH¢) | |
| STG | 447 | |  |  |  |  |  |  |  |  | **Photographic and cinematographic equipment and optical instruments (D)** | | | | |  |  |  |  | |
| Sony Experia | 448 | |  |  |  |  |  |  |  |  | Digital photo camera (specify) | 467 |  |  |  |  |  |  |  |
| Huawei | 449 | |  |  |  |  |  |  |  |  | Video cameras | 468 |  |  |  |  |  |  |  |
| Microsoft (Nokia) | 450 | |  |  |  |  |  |  |  |  | Still cameras | 469 |  |  |  |  |  |  |  |
| HTC | | 451 |  |  |  |  |  |  |  |  | Other photographic equipment | 470 |  |  |  |  |  |  |  |
| Other mobile phone | 452 | |  |  |  |  |  |  |  |  | **Information processing equipment** |  |  |  |  |  |  |  |  |
| Telefax machines(specify) | 453 | |  |  |  |  |  |  |  |  | ***Desktop Personal Computer (new)*** |  |  |  |  |  |  |  |  |
| Repair of handset, mobile phones and fax machines | 454 | |  |  |  |  |  |  |  |  | Dell | 473 |  |  |  |  |  |  |  |
| **RECREATION AND CULTURE** | | |  |  |  |  |  |  |  |  | HP | 474 |  |  |  |  |  |  |  |
| ***Equipment for the reception, recording and*** |  | |  |  |  |  |  |  |  |  | Compaq | 475 |  |  |  |  |  |  |  |
| Portable radio (specify) | 457 | |  |  |  |  |  |  |  |  | Other desktop computer (specify) | 476 |  |  |  |  |  |  |  |
| *DVD-Player (specify)* | 458 | |  |  |  |  |  |  |  |  | ***Desktop Personal Computer (second hand)*** | |  |  |  |  |  |  |  |
| Automobile Radio With CD Player, MP3 Playback | 459 | |  |  |  |  |  |  |  |  | Dell | 478 |  |  |  |  |  |  |  |
| LCD Television | 460 | |  |  |  |  |  |  |  |  | HP | 479 |  |  |  |  |  |  |  |
| LG | 461 | |  |  |  |  |  |  |  |  | Compaq | 480 |  |  |  |  |  |  |  |
| Samsung | 462 | |  |  |  |  |  |  |  |  | Other desktop computer(specify) | 481 |  |  |  |  |  |  |  |
| Hisense | 463 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other LCD Television (specify) | 464 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Parabolic/satelite receivers | 465 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

9.13

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES) NAME OF PERSON(S) RESPONSIBLE FOR PURCHASES PERSONS INTERVIEWED ID

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| PART A: NON-FOOD EXPENSES (LESS FREQUENTLY PURCHASED ITEMS) | |  |  |  |  | |  | | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| RESPONDENTS ARE THE PERSONS MAINLY RESPONSIBLE FOR | |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| HOUSEHOLD PURCHASES COPY FROM SECTION 6 Q.8 |  |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| I T E M | C  O  D  E | | 1  Was anything spent by the household on ……in the past 12 months?  Yes…1  No….2  (>> 3) | 1a  Quantity | | 2  How much was spent on …………… in the past 12 months altogether? | 3  Has the household used, consumed out of its own output or has received as gift …...in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift in the past 12 months  (NEXT ITEM) |  | I T E M | C  O  D  E | 1  Was anything spent by the household on …… in the past 12 months?  Yes…1  No…..2  (>> 3) | 1a  Quantity | | | 2  How much was spent on ……………. in the past 12 months altogether? | 3  Has the household used, consumed out of its own output or has received as gift ….in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift?  (NEXT ITEM) | |
| QTY | UNIT | AMOUNT (GH¢) | QUAN-TITY | UNIT | VALUE (GH¢) | QTY | | UNIT | AMT (GH¢) | QUANTITY | UNIT | VALUE (GH¢) | |
| ***Laptop Personal Computer(new)*** | | |  |  |  |  |  |  |  |  | ***Major durables for outdoor recreation (D)*** | | | |  |  |  |  |  |  | |
| Dell | 483 | |  |  |  |  |  |  |  |  | 6-String Basic Acoustic Guitar for Beginner | 504 |  |  | |  |  |  |  |  |
| HP | 484 | |  |  |  |  |  |  |  |  | Portable Electronic Keyboard (Organ) | 505 |  |  | |  |  |  |  |  |
| Toshiba | 485 | |  |  |  |  |  |  |  |  | ***Musical instruments and major durables for indoor recreation*** | | | | | |  |  |  |  |
| Lenovo | | 486 |  |  |  |  |  |  |  |  | Electronic pianos (specify) | 507 |  |  | |  |  |  |  |  |
| Other laptop(specify) | 487 | |  |  |  |  |  |  |  |  | Electronic guitar(specify) | 508 |  |  | |  |  |  |  |  |
| ***Laptop Personal Computer(second hand)*** | | | | |  |  |  |  |  |  | Barbie Baby Doll for Girls | 509 |  |  | |  |  |  |  |  |
| Dell | 489 | |  |  |  |  |  |  |  |  | Video game equipment and toys | 510 |  |  | |  |  |  |  |  |
| HP | 490 | |  |  |  |  |  |  |  |  | ***Equipment for sport, camping and open-air recreation (SD)*** | | | | | |  |  |  |  |
| Toshiba | 491 | |  |  |  |  |  |  |  |  | Pack of 52 playing card game | 512 |  |  | |  |  |  |  |  |
| Other laptop(specify) | 492 | |  |  |  |  |  |  |  |  | Leather Football | 513 |  |  | |  |  |  |  |  |
| Calculator (scientific) | 493 | |  |  |  |  |  |  |  |  | Flower Pot - Terracotta for potting plants in the house | 514 |  |  | |  |  |  |  |  |
| PlayStation 3 game | 494 | |  |  |  |  |  |  |  |  | Other major durables for recreation | 515 |  |  | |  |  |  |  |  |
| ***Recording media*** |  | |  |  |  |  |  |  |  |  | ***Gardens, plants and flowers*** |  |  |  | |  |  |  |  |  |
| Pen drive/external hard drives | 496 | |  |  |  |  |  |  |  |  | Flower,(Natural/artificial) | 517 |  |  | |  |  |  |  |  |
| CD/DVD | 497 | |  |  |  |  |  |  |  |  | Fertilizers for gardening | 518 |  |  | |  |  |  |  |  |
| Memory chips/SD cards | 498 | |  |  |  |  |  |  |  |  | Compost for gardening | 519 |  |  | |  |  |  |  |  |
| ***Repair of audio-visual, photographic and information processing equipment (S)*** | | | | | | |  |  |  |  | ***Pets and related products*** |  |  |  | |  |  |  |  |  |
| Personal Computer Technician Services | 500 | |  |  |  |  |  |  |  |  | Pets | 521 |  |  | |  |  |  |  |  |
| Services of TV Technician | 501 | |  |  |  |  |  |  |  |  | Tinned Dog Food | 522 |  |  | |  |  |  |  |  |
| Repairs of other equipment for data processing | 502 | |  |  |  |  |  |  |  |  | Tinned Cat Food | 523 |  |  | |  |  |  |  |  |
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9.14

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES) NAME OF PERSON(S) RESPONSIBLE FOR PURCHASES PERSONS INTERVIEWED ID

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| PART A: NON-FOOD EXPENSES (LESS FREQUENTLY PURCHASED ITEMS) | |  |  |  |  | |  | | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| RESPONDENTS ARE THE PERSONS MAINLY RESPONSIBLE FOR | |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| HOUSEHOLD PURCHASES COPY FROM SECTION 6 Q.8 |  |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| I T E M | C  O  D  E | 1  Was anything spent by the household on ……in the past 12 months?  Yes…1  No….2  (>> 3) | 1a  Quantity | | 2  How much was spent on …………… in the past 12 months altogether? | 3  Has the household used, consumed out of its own output or has received as gift …...in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift in the past 12 months  (NEXT ITEM) |  | I T E M | C  O  D  E | 1  Was anything spent by the household on …… in the past 12 months?  Yes…1  No…..2  (>> 3) | 1a  Quantity | | | | 2  How much was spent on ……………. in the past 12 months altogether? | | 3  Has the household used, consumed out of its own output or has received as gift ….in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift?  (NEXT ITEM) | | |
| QTY | UNIT | AMOUNT (GH¢) | QUAN-TITY | UNIT | VALUE (GH¢) | QTY | | UNIT | | AMT (GH¢) | | QUANTITY | | UNIT | | VALUE (GH¢) | | |
| ***Veterinary and other services for pets*** | |  |  |  |  |  |  |  |  | Hiring of spinners | 543 |  |  |  | |  | |  | |  | |  | |
| Vaccination of Dog against rabies | 525 |  |  |  |  |  |  |  |  | Color Passport Pictures Set | 544 |  |  | |  | |  | |  | |  | |  | |
| Veterinary service, castration of a cat | 526 |  |  |  |  |  |  |  |  | Purchase of DVD/VCD movies | 545 |  |  | |  | |  | |  | |  | |  | |
| Cost of veterinary products | 527 |  |  |  |  |  |  |  |  | Concert/club and music attendance | 546 |  |  | |  | |  | |  | |  | |  | |
| ***RECREATION AND CULTURAL SERVICES*** | | |  |  |  |  |  |  |  | Funeral | 547 |  |  | |  | |  | |  | |  | |  | |
| Use of Gym facilities | 529 |  |  |  |  |  |  |  |  | Weddings/Outdooring | 548 |  |  | |  | |  | |  | |  | |  | |
| Football game (Popular stand) | 530 |  |  |  |  |  |  |  |  | Cultural festivals donations | 549 |  |  | |  | |  | |  | |  | |  | |
| Fair and amusement parks (Trade fair, children parks) | 531 |  |  |  |  |  |  |  |  | ***Games of chance*** |  |  |  | |  | |  | |  | |  | |  | |
| National parks and Zoos | 532 |  |  |  |  |  |  |  |  | Football betting eg Safaribet | 551 |  |  | |  | |  | |  | |  | |  | |
| TV license fees | 533 |  |  |  |  |  |  |  |  | **Miscellaneous printed matter - (excluding expenditure in Section 2A)** | | | | | | |  | |  | |  | |  | |
| Payment for services of private TVs (DSTV, GOTV etc) | 534 |  |  |  |  |  |  |  |  | Longman | 553 |  |  | |  | |  | |  | |  | |  | |
| Swimming Admission/ Beaches | 535 |  |  |  |  |  |  |  |  | Cambridge | 554 |  |  | |  | |  | |  | |  | |  | |
| Piano Lession | 536 |  |  |  |  |  |  |  |  | ***Text books*** |  |  |  | |  | |  | |  | |  | |  | |
| Horse racing | 537 |  |  |  |  |  |  |  |  | English Textbook(jss) | 556 |  |  | |  | |  | |  | |  | |  | |
| ***Cultural services*** |  |  |  |  |  |  |  |  |  | Mathematics Textbook(jss) | 557 |  |  | |  | |  | |  | |  | |  | |
| Cinema/theatre/Video houses | 539 |  |  |  |  |  |  |  |  | English Textbook(shs) | 558 |  |  | |  | |  | |  | |  | |  | |
| Digital Prints | 540 |  |  |  |  |  |  |  |  | Mathematics Textbook(shs) | 559 |  |  | |  | |  | |  | |  | |  | |
| Film processing and photo printing – Normal Service, 36 prints | 541 |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  | |  | |  | |  | |
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9.15

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES) NAME OF PERSON(S) RESPONSIBLE FOR PURCHASES PERSONS INTERVIEWED ID

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| PART A: NON-FOOD EXPENSES (LESS FREQUENTLY PURCHASED ITEMS) | |  |  |  |  | |  | | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| RESPONDENTS ARE THE PERSONS MAINLY RESPONSIBLE FOR | |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| HOUSEHOLD PURCHASES COPY FROM SECTION 6 Q.8 |  |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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|  |  |  |  |  |  | Date of this visit | | | | |  | |  | | | |  |  |  |  | |  | |  | |  | |

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| I T E M | C  O  D  E | 1  Was anything spent by the household on ……in the past 12 months?  Yes…1  No….2  (>> 3) | 1a  Quantity | | 2  How much was spent on …………… in the past 12 months altogether? | 3  Has the household used, consumed out of its own output or has received as gift …...in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift in the past 12 months  (NEXT ITEM) |  | I T E M | C  O  D  E | 1  Was anything spent by the household on …… in the past 12 months?  Yes…1  No…..2  (>> 3) | 1a  Quantity | | | 2  How much was spent on ……………. in the past 12 months altogether? | | 3  Has the household used, consumed out of its own output or has received as gift ….in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift?  (NEXT ITEM) | | |
| QTY | UNIT | AMOUNT (GH¢) | QUAN-TITY | UNIT | VALUE (GH¢) | QTY | UNIT | | AMT (GH¢) | | QUANTITY | | UNIT | | VALUE (GH¢) | | |
| ***Other miscellaneous printed matter*** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  | |  | |
| Greeting cards | 561 |  |  |  |  |  |  |  |  | Tertiary expenses (public & private) | 578 |  |  |  | |  | |  | |  | |  | |
| Calendars | 562 |  |  |  |  |  |  |  |  | Graduation fees | 579 |  |  |  | |  | |  | |  | |  | |
| Diaries | 563 |  |  |  |  |  |  |  |  | Fees for gown(Graduation) | 580 |  |  |  | |  | |  | |  | |  | |
| ***Stationery and drawing materials*** | | |  |  |  |  |  |  |  | Examination fees | 581 |  |  |  | |  | |  | |  | |  | |
| Exercise book (20 sheets) | 565 |  |  |  |  |  |  |  |  | Graduation fees excluding gown | 582 |  |  |  | |  | |  | |  | |  | |
| Note book (hard cover) | 566 |  |  |  |  |  |  |  |  | ***Education not definable by level*** |  |  |  |  | |  | |  | |  | |  | |
| Other stationery and drawing materials (specify) | 567 |  |  |  |  |  |  |  |  | Apprenticeship fees (eg, Seamstress, carpentry, hairdresser) | 584 |  |  |  | |  | |  | |  | |  | |
| ***Package holidays*** |  |  |  |  |  |  |  |  |  | Examination fees (Adult literacy courses) | 585 |  |  |  | |  | |  | |  | |  | |
| Excursions local | 569 |  |  |  |  |  |  |  |  | **RESTAURANTS AND HOTELS** |  |  |  |  | |  | |  | |  | |  | |
| Pilgrimage local | 570 |  |  |  |  |  |  |  |  | ***Accommodation services*** | 587 |  |  |  | |  | |  | |  | |  | |
| Excursion/Pilgrimage abroad | 571 |  |  |  |  |  |  |  |  | Cost of bed occupancy per day (health facilities) | 588 |  |  |  | |  | |  | |  | |  | |
| Other packaged holidays | 572 |  |  |  |  |  |  |  |  | Hostels private | 589 |  |  |  | |  | |  | |  | |  | |
| **EDUCATION- NOT CAPTURED IN SECTION 2A** | | | | |  |  |  |  |  | Hostels public | 590 |  |  |  | |  | |  | |  | |  | |
| Pre-primary expenses (public & private) | 574 |  |  |  |  |  |  |  |  | Hotel, Capital City – 3 Star Bed and Breakfast | 591 |  |  |  | |  | |  | |  | |  | |
| Primary expenses (public & private) | 575 |  |  |  |  |  |  |  |  | Hotel, Capital City – 2 Star Bed and Breakfast | 592 |  |  |  | |  | |  | |  | |  | |
| JHS expenses (public & private) | 576 |  |  |  |  |  |  |  |  | Budget Hotel, Capital City – No Star Bed Only | 593 |  |  |  | |  | |  | |  | |  | |
| SHS and Post-secondary (public & private) | 577 |  |  |  |  |  |  |  |  | Simple Traditional Hotel | 594 |  |  |  | |  | |  | |  | |  | |
|  |  |  |  |  |  |  |  |  |  | Hostel dormitory | 595 |  |  |  | |  | |  | |  | |  | |

9.16

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES) NAME OF PERSON(S) RESPONSIBLE FOR PURCHASES PERSONS INTERVIEWED ID

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| PART A: NON-FOOD EXPENSES (LESS FREQUENTLY PURCHASED ITEMS) | |  |  |  |  | |  | | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| RESPONDENTS ARE THE PERSONS MAINLY RESPONSIBLE FOR | |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| HOUSEHOLD PURCHASES COPY FROM SECTION 6 Q.8 |  |  |  |  |  |  | |  | |  | |  | |  | |  | | | | | |  | |  | |  | |
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| I T E M | C  O  D  E | | 1  Was anything spent by the household on ……in the past 12 months?  Yes…1  No….2  (>> 3) | | 1a  Quantity | | | 2  How much was spent on …………… in the past 12 months altogether? | | 3  Has the household used, consumed out of its own output or has received as gift …...in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift in the past 12 months  (NEXT ITEM) | |  | | I T E M | | C  O  D  E | | 1  Was anything spent by the household on …… in the past 12 months?  Yes…1  No…..2  (>> 3) | 1a  Quantity | | | | 2  How much was spent on ……………. in the past 12 months altogether? | | | 3  Has the household used, consumed out of its own output or has received as gift ….in the past 12 months?  **IF NONE PUT ‘00’ &>>NEXT ITEM** | | | | 4  How much of …………….. has the household used or consumed out of own production, or has received as gift?  (NEXT ITEM) |
| QTY | | UNIT | AMT (GH¢) | | QUAN-TITY | | UNIT | | VALUE (GH¢) | | QTY | UNIT | | | AMT (GH¢) | | | QTH | | | UNIT | VALUE (GH¢) |
| **MISCELLANEOUS GOODS AND SERVICES** | | | | | | |  |  | |  | |  | |  | |  | | MS Office Home or Student version software (specify) | | 618 | |  |  |  |  | | |  | | |  | | |  |
| ***Electric appliances for personal care*** | | | | |  | |  |  | |  | |  | |  | |  | | Antivirus software (specify) | | 619 | |  |  |  | | |  | | |  | | |  |  |
| Electric Shaving Machine | 598 | |  | |  | |  |  | |  | |  | |  | |  | | Other (specify) | | 620 | |  |  |  | | |  | | |  | | |  |  |
| ***Jewellery, clocks and watches*** | 599 | |  | |  | |  |  | |  | |  | |  | |  | | ***Social protection*** | |  | |  |  |  | | |  | | |  | | |  |  |
| Wrist watch (engine watch) specify | 600 |  | |  | |  | |  |  | |  | |  | |  | | Gifts and tips | | 622 | |  | |  |  | |  | | |  | | |  | |  |
| Wrist watch (battery) (specify) | 601 | |  | |  | |  |  | |  | |  | |  | |  | | Payment at churches and social clubs | | 623 | |  |  |  | | |  | | |  | | |  |  |
| Wrist watch (digital watch) (specify) | 602 | |  | |  | |  |  | |  | |  | |  | |  | | ***Life insurance*** | |  | |  |  |  | | |  | | |  | | |  |  |
| Wall clock (specify) | 603 | |  | |  | |  |  | |  | |  | |  | |  | | Premium for life insurance | | 625 | |  |  |  | | |  | | |  | | |  |  |
| Analogue Travel alarm, quartz | 604 | |  | |  | |  |  | |  | |  | |  | |  | | ***Insurance connected with the dwelling*** | | | |  |  |  | | |  | | |  | | |  |  |
| Wedding type ring | 605 | |  | |  | |  |  | |  | |  | |  | |  | | Premium on building | | 627 | |  |  |  | | |  | | |  | | |  |  |
| Engagement ring | 606 | |  | |  | |  |  | |  | |  | |  | |  | | ***Insurance connected with health*** | |  | |  |  |  | | |  | | |  | | |  |  |
| Necklace (Chain),Gold | 607 | |  | |  | |  |  | |  | |  | |  | |  | | Premium for health insurance | | 629 | |  |  |  | | |  | | |  | | |  |  |
| Other accessories (specify) | 608 | |  | |  | |  |  | |  | |  | |  | |  | | ***Insurance connected with transport*** | |  | |  |  |  | | |  | | |  | | |  |  |
| Repairs of jewellery, clocks and watches | 609 | |  | |  | |  |  | |  | |  | |  | |  | | Motor vehicle insurance (third party)private saloon car | | 631 | |  |  |  | | |  | | |  | | |  |  |
| ***Other personal effects*** |  | |  | |  | |  |  | |  | |  | |  | |  | | Charges for money orders, bankers drafts | | 634 | |  |  |  | | |  | | |  | | |  |  |
| Foldable umbrella | 611 | |  | |  | |  |  | |  | |  | |  | |  | | Brokerage charges | | 635 | |  |  |  | | |  | | |  | | |  |  |
| Suitcase, with trolley system | 612 | |  | |  | |  |  | |  | |  | |  | |  | | ***Other services n.e.c.*** | |  | |  |  |  | | |  | | |  | | |  |  |
| Synthetic racksack (carrier bag) | 613 | |  | |  | |  |  | |  | |  | |  | |  | | Legal service,( will fees) | | 637 | |  |  |  | | |  | | |  | | |  |  |
| Walking-stick synthetic umbrella with plastic handle | 615 | |  | |  | |  |  | |  | |  | |  | |  | | Agent fees (house agents) | | 638 | |  |  |  | | |  | | |  | | |  |  |
| Leather wallet | 616 | |  | |  | |  |  | |  | |  | |  | |  | | Photocopy charge per A4 sheet (black and white) | | 639 | |  |  |  | | |  | | |  | | |  |  |
| Tablet computer | 617 | |  | |  | |  |  | |  | |  | |  | |  | | Newspaper advertisement, (funeral) | | 640 | |  |  |  | | |  | | |  | | |  |  |

9.17

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES)

PART B: EXPENSES (FREQUENTLY PURCHASED ITEMS) PERSONS INTERVIEWED ID

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| PERSON RESPONSIBLE |  |  |  |  |  | | |  | |  | |  |
| COPY FROM SECTION 6 Q.8 |  |  |  |  |  | | | | | | | |
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| ITEM | C  O  D  E | 1.  How much was spent and what quantity was acquired of………...since my last visit? | | | 2.  How much was spent and what quantity was acquired of………...since my last visit? | | | 3.  How much was spent and what quantity was acquired of………...since my last visit? | | | 4.  How much was spent and what quantity was acquired of………...since my last visit? | | | 5.  How much was spent and what quantity was acquired of………...since my last visit? | | | | | 6.  How much was spent and what quantity was acquired of………...since my last visit? | | | | |
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| **FOOD AND NON-ALCOHOLIC BEVERAGES** | | | | | | | | | | | | | | | | | | | | | | | |
| **Rice - Local** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Dada Ba | 001 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Oman Ba | 002 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Mandela | 003 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Gold Star | 004 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Afife | 005 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Other local(specify) | 006 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| **Rice - Imported** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Jasmine Rice | 010 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Basmati Rice | 011 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Uncle Ben's Rice (imported) | 012 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Lele Rice | 013 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Royal Feast | 014 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Gino Rice | 015 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Royal Aroma | 016 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Heaven | 017 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Cindy | 018 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Bella | 019 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Sultana | 020 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Mama's Pride | 021 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Red Eagle | 022 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Other imported rice specify | 023 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| **Guinea corn/sorghum** | 027 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| **Maize** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| White maize grains | 028 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Yellow maize grains | 029 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Millet | 030 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
| Millet flour | 031 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  |  |  | | |  |
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9.18

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES)

PART B: EXPENSES (FREQUENTLY PURCHASED ITEMS) PERSONS INTERVIEWED ID

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| ITEM | C  O  D  E | 1.  How much was spent and what quantity was acquired of………...since my last visit? | | | | | 2.  How much was spent and what quantity was acquired of………...since my last visit? | | | | | 3.  How much was spent and what quantity was acquired of………...since my last visit? | | | | | 4.  How much was spent and what quantity was acquired of………...since my last visit? | | | | | 5.  How much was spent and what quantity was acquired of………...since my last visit? | | | | | 6.  How much was spent and what quantity was acquired of………...since my last visit? | | | | |
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| **FOOD AND NON-ALCOHOLIC BEVERAGES** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Wheat Flour** |  |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| Takoradi Flour Mill | 032 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| GMG | 033 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| Wheat semolina,suji | 034 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| **Maize, ground / corn dough** |  |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| Corn dough | 035 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| **Cerelac (Baby food)** |  |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| Maize | 036 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| Millet | 037 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| Rice | 038 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| Beans | 039 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| Mixed fruit | 040 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| Wheat | 041 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| Other (specify) | 042 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| **White Oats (other cereals)** |  |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| Good Morning | 047 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| Quaker oats | 048 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| Other oats (specify) | 049 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| **Cassava-processed** |  |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| Cassava - Kokonte | 053 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| Cassava dough | 054 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| Yellow gari | 055 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| White gari | 056 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| **Bread** |  |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| Sugar bread | 058 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| Whole wheat bread | 059 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| Butter bread | 060 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| Tea bread | 061 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
| Other bread (specify) | 062 |  |  | | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |  | |  | |  |
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9.19

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES)

PART B: EXPENSES (FREQUENTLY PURCHASED ITEMS) PERSONS INTERVIEWED ID

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| ITEM | C  O  D  E | 1.  How much was spent and what quantity was acquired of………...since my last visit? | | | 2.  How much was spent and what quantity was acquired of………...since my last visit? | | | 3.  How much was spent and what quantity was acquired of………...since my last visit? | | | 4.  How much was spent and what quantity was acquired of………...since my last visit? | | | 5.  How much was spent and what quantity was acquired of………...since my last visit? | | | 6.  How much was spent and what quantity was acquired of………...since my last visit? | | | |
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| **FOOD AND NON-ALCOHOLIC BEVERAGES** | | | | | | | | | | | | | | | | | | | | |
| **Biscuit (simple cookie)** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Picadilly biscuit | 067 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Kings crackers | 068 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Malt and milk | 069 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Cream crackers | 070 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Short cake | 071 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Perks biscuit | 072 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Digestive biscuit | 073 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Jack and Jill | 074 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Wafers | 075 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Ginger | 076 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Short Bread | 077 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Other biscuits (specify) | 078 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **Other cereal products** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Indomie or instant noodles | 083 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Cornflakes (Kellogg's) | 084 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Macaroni | 085 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Spaghetti | 086 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Maizena | 087 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Couscous | 088 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Other cereal products (specify) | 089 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **Meat** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Beef with bones | 095 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Beef without bones (steak) | 096 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Cow leg , local | 097 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Cow leg imported | 098 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Cow face (head) | 099 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Cow offals (towel) | 100 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Other cow/beef product (specify) | 101 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |

9.20

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES)

PART B: EXPENSES (FREQUENTLY PURCHASED ITEMS) PERSONS INTERVIEWED ID

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| ITEM | | C  O  D  E | 1.  How much was spent and what quantity was acquired of………...since my last visit? | | | 2.  How much was spent and what quantity was acquired of………...since my last visit? | | | 3.  How much was spent and what quantity was acquired of………...since my last visit? | | | 4.  How much was spent and what quantity was acquired of………...since my last visit? | | | 5.  How much was spent and what quantity was acquired of………...since my last visit? | | | 6.  How much was spent and what quantity was acquired of………...since my last visit? | | |
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| **FOOD AND NON-ALCOHOLIC BEVERAGES** | | | | | | | | | | | | | | | | | | | | |
| **Pork** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| pork meat | | 105 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| pork, ribs | | 106 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| pork, shoulder | | 107 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| pork , fillet | | 108 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Pork feet | | 109 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other pork meat (specify) | | 110 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Mutton chop** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| mutton mixed cut | | 115 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Goat , live | | 116 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Goat meat | | 117 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Live chicken** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Local breed | | 118 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Poultry farm breed | | 119 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Frozen chicken** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| whole chicken broiler | | 120 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Chicken parts(thighs) | | 121 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Chicken parts(wings) | | 122 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Gizzard | | 123 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| chicken breast without skin | | 124 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| chicken breast with skin and bones | | 125 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other chicken product (specify) | | 126 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Other domestic poultry** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Guinea fowl - live | | 127 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Corned Beef** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Lele corned Beef | | 131 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Exeter corned beef | | 132 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Bella corned beef | | 133 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other corned beef (specify) | | 134 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

9.21

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES)

PART B: EXPENSES (FREQUENTLY PURCHASED ITEMS) PERSONS INTERVIEWED ID

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| ITEM | C  O  D  E | 1.  How much was spent and what quantity was acquired of………...since my last visit? | | | 2.  How much was spent and what quantity was acquired of………...since my last visit? | | | 3.  How much was spent and what quantity was acquired of………...since my last visit? | | | 4.  How much was spent and what quantity was acquired of………...since my last visit? | | | 5.  How much was spent and what quantity was acquired of………...since my last visit? | | | 6.  How much was spent and what quantity was acquired of………...since my last visit? | | |
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| **FOOD AND NON-ALCOHOLIC BEVERAGES** | | | | | | | | | | | | | | | | | | | |
| **Sausage** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Beef sausage | 139 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Pork sausage | 140 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Chicken sausage | 141 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Other meat** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Bushmeat (Grasscutter) | 142 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Game birds | 143 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other meat (dog, cat, etc.) | 144 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **FISH: FRESH, DRIED, FRIED,CANNED** | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Kpala (Starvids)frozen | 149 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Shrimps | 150 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Snails | 151 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Crab | 152 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Fish smoked (river) | 153 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Fish smoked (sea) | 154 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Herrings -smoked | 155 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Salmon (smoked) | 156 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Fish (fried) | 157 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Dried fish - Koobi | 158 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Fish (salted) e.g. Kako | 159 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Tilapia (fresh and frozon) | 160 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other fish (specify) | 161 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Fish (canned) -Sardines in vegetable oil** | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Titus | 165 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Princess | 166 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Obaapa | 167 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Gino | 168 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Smile | 169 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Lele | 170 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Vega | 171 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other sardines (specify) | 172 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

9.22

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES)

PART B: EXPENSES (FREQUENTLY PURCHASED ITEMS) PERSONS INTERVIEWED ID

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| ITEM | | C  O  D  E | 1.  How much was spent and what quantity was acquired of………...since my last visit? | | | 2.  How much was spent and what quantity was acquired of………...since my last visit? | | | 3.  How much was spent and what quantity was acquired of………...since my last visit? | | | 4.  How much was spent and what quantity was acquired of………...since my last visit? | | | 5.  How much was spent and what quantity was acquired of………...since my last visit? | | | | 6.  How much was spent and what quantity was acquired of………...since my last visit? | | | |
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| **FOOD AND NON-ALCOHOLIC BEVERAGES** | | | | | | | | | | | | | | | | | | | | | | |
| **Tuna in vegetable oil** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Star kist | | 176 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Vega | | 177 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Geisha | | 178 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Tesco | | 179 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| John West | | 180 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Other (specify) | | 181 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| **Mackerel in tomato sauce** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| African Queen | | 185 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Geisha | | 186 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Gino | | 187 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Ena pa | | 188 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Obaapa | | 189 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Delay | | 190 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Teacher | | 191 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Other mackerel (specify) | | 192 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| **MILK AND MILK PRODUCTS** | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Milk (Fresh) | | 197 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| **Powdered milk** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Nido (Sachet) | | 198 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Peak (Sachet) | | 199 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Milgro (Sachet) | | 200 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Cowbell (Sachet) | | 201 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Ideal (sachet) | | 202 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Nunu (sachet) | | 203 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Loya (sachet) | | 204 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Miksi (sachet) | | 205 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Vega (sachet) | | 206 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |
| Other powdered milk (specify) | | 207 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |

9.23

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES)

PART B: EXPENSES (FREQUENTLY PURCHASED ITEMS) PERSONS INTERVIEWED ID

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| ITEM | C  O  D  E | 1.  How much was spent and what quantity was acquired of………...since my last visit? | | | 2.  How much was spent and what quantity was acquired of………...since my last visit? | | | 3.  How much was spent and what quantity was acquired of………...since my last visit? | | | 4.  How much was spent and what quantity was acquired of………...since my last visit? | | | 5.  How much was spent and what quantity was acquired of………...since my last visit? | | | 6.  How much was spent and what quantity was acquired of………...since my last visit? | | |
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| **FOOD AND NON-ALCOHOLIC BEVERAGES** | | | | | | | | | | | | | | | | | | | |
| **Evaporated Milk (e.g. Ideal, Peak etc.)** | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Ideal | 301 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Peak | 302 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Nunu | 303 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Vega | 304 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Carnation | 305 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other milk (specify) | 306 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Tinned milk (condensed)** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Peak | 401 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other tinned milk(specify) | 402 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Other Milk Products** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Fan Ice | 407 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Fan Yoghurt | 408 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| FanDango | 409 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Fan Choco | 410 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other ice cream (specify) | 411 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Eggs** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Chicken eggs (fresh, single) | 416 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other eggs | 417 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Oils and fats** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Margarine | 421 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Coconut oil | 422 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Groundnut oil | 423 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Palm oil (red oil) | 424 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Vegetable oil (eg. Frytol, Gino, Obaapa) | 425 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Shea butter | 426 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Palm kernel oil | 427 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other oils (specify) | 428 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES)

PART B: EXPENSES (FREQUENTLY PURCHASED ITEMS) PERSONS INTERVIEWED ID

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| ITEM | C  O  D  E | 1.  How much was spent and what quantity was acquired of………...since my last visit? | | | 2.  How much was spent and what quantity was acquired of………...since my last visit? | | | 3.  How much was spent and what quantity was acquired of………...since my last visit? | | | 4.  How much was spent and what quantity was acquired of………...since my last visit? | | | 5.  How much was spent and what quantity was acquired of………...since my last visit? | | | 6.  How much was spent and what quantity was acquired of………...since my last visit? | | |
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| **FOOD AND NON-ALCOHOLIC BEVERAGES** | | | | | | | | | | | | | | | | | | | |
| **FRUITS: FRESH OR CANNED** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Coconut (fresh) | 432 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Coconut (dried) | 433 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Banana | 434 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Oranges | 435 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Pineapple | 436 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Mango | 437 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Water melon | 438 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Avocado pear | 439 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Apples (foreign) | 440 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Grapes | 441 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Sweet apple | 442 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Lime | 443 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Cashew | 444 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Pawpaw | 445 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other fruits(specify) | 446 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Canned fruits** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Canned or processed fruits | 452 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Vegetables** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Cocoyam leaves (kontomire) or Alefu | 453 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Sweet pepper | 454 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Carrot | 455 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Garden eggs | 456 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Okro (fresh) | 457 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Pepper (fresh) | 458 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Dried pepper (red) | 459 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Powder Pepper | 460 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Onions (large) | 461 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Shallots | 462 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Tomatoes (Fresh) | 463 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other vegetables (specify) | 464 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

9.25

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES)

PART B: EXPENSES (FREQUENTLY PURCHASED ITEMS) PERSONS INTERVIEWED ID

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| ITEM | C  O  D  E | 1.  How much was spent and what quantity was acquired of………...since my last visit? | | | 2.  How much was spent and what quantity was acquired of………...since my last visit? | | | 3.  How much was spent and what quantity was acquired of………...since my last visit? | | | 4.  How much was spent and what quantity was acquired of………...since my last visit? | | | 5.  How much was spent and what quantity was acquired of………...since my last visit? | | | 6.  How much was spent and what quantity was acquired of………...since my last visit? | | |
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| **FOOD AND NON-ALCOHOLIC BEVERAGES** | | | | | | | | | | | | | | | | | | | |
| **Tomatoe Paste** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Gino | 473 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Obaapa | 474 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Pomo | 475 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Tam Tam | 476 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Lele | 477 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Bella | 478 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Tasty tom | 479 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other tomato paste (specify) | 480 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Pulses and Nuts** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| White beans (cowpea) | 485 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Palm nut (fruits) | 486 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Groundnuts (shelled) | 487 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Groundnut (paste) | 488 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Agushie seeds (or milled) | 489 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Starchy Food and Tubers** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Plantain | 491 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Cassava (fresh) | 492 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Cocoyam | 493 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Yam | 494 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Water yam | 495 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Taro | 496 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Potatoes | 497 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other Tubers (specify) | 498 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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9.26

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES)

PART B: EXPENSES (FREQUENTLY PURCHASED ITEMS) PERSONS INTERVIEWED ID

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| ITEM | C  O  D  E | 1.  How much was spent and what quantity was acquired of………...since my last visit? | | | 2.  How much was spent and what quantity was acquired of………...since my last visit? | | | 3.  How much was spent and what quantity was acquired of………...since my last visit? | | | 4.  How much was spent and what quantity was acquired of………...since my last visit? | | | 5.  How much was spent and what quantity was acquired of………...since my last visit? | | | 6.  How much was spent and what quantity was acquired of………...since my last visit? | | |
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| **FOOD AND NON-ALCOHOLIC BEVERAGES** | | | | | | | | | | | | | | | | | | | |
| **Sugar, jam, honey, chocolate and confectionery** | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Cubed sugar | 503 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Granulated sugar | 504 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Honey | 505 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Chocolate (Bar)** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Golden tree | 511 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other cholate | 512 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Chewing gum** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Trident | 513 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| PK | 514 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Bubble gum | 515 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Mentos | 516 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other gums | 517 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other confectionery (specify) | 518 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Spices and condiments** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Garlic | 523 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Ginger | 524 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Vinegar | 525 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Dawadawa | 526 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Curry powder | 527 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Chilli powder (black pepper) | 528 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other spices (specify) | 529 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Condiments** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Maggi Cube | 535 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Royco cube | 536 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Onga cube | 537 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Onga 3-in-1 | 538 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Benny | 539 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other condiments (specify) | 540 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

9.27

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES)

PART B: EXPENSES (FREQUENTLY PURCHASED ITEMS) PERSONS INTERVIEWED ID

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| ITEM | C  O  D  E | 1.  How much was spent and what quantity was acquired of………...since my last visit? | | | 2.  How much was spent and what quantity was acquired of………...since my last visit? | | | 3.  How much was spent and what quantity was acquired of………...since my last visit? | | | 4.  How much was spent and what quantity was acquired of………...since my last visit? | | | 5.  How much was spent and what quantity was acquired of………...since my last visit? | | | 6.  How much was spent and what quantity was acquired of………...since my last visit? | | | |
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| **Food products n.e.c.** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **Salt (iodised)** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Anapuna iodated salt | 545 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| U2 iodated salt | 546 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Other salt (specify) | 547 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **NON ALCHOLIC BEVERAGES** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **Coffee, tea and cocoa** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Nescafe | 550 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Pure Cocoa Powder (eg. Brown gold) | 551 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Tea bags, (eg. Lipton) | 552 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **Cocoa with milk powder beverages** | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Bournvita | 554 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Cow bell (coffee, choco etc.) | 555 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| This way chocolate drink | 556 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Country milk | 557 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Ideal | 558 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Milo | 559 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Richoco | 560 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Other beverage drinks(specify) | 561 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **Mineral waters, soft drinks, fruit and vegetable juices** | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  | |
| Mineral water (bottled) | 565 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Satchet water | 566 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **Soft drinks except malt** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Coca Cola /Fanta/Sprite | 567 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Pepsi/Mirinda | 568 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Alvaro | 569 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Other soft drinks(specify) | 570 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |

9.28

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES)

PART B: EXPENSES (FREQUENTLY PURCHASED ITEMS) PERSONS INTERVIEWED ID

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| ITEM | | C  O  D  E | 1.  How much was spent and what quantity was acquired of………...since my last visit? | | | 2.  How much was spent and what quantity was acquired of………...since my last visit? | | | 3.  How much was spent and what quantity was acquired of………...since my last visit? | | | 4.  How much was spent and what quantity was acquired of………...since my last visit? | | | 5.  How much was spent and what quantity was acquired of………...since my last visit? | | | 6.  How much was spent and what quantity was acquired of………...since my last visit? | | |
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| **Malt drinks(bottle)** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Beta malt | | 575 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 star | | 576 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Malta Guinness | | 577 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Malt schweppes | | 578 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Mighty malt | | 579 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Magic malt | | 580 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Giant malt | | 581 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Lion Malt | | 582 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other bottled malt drinks(specify) | | 583 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Malt drinks (Canned )** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Magic malt | | 587 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Malta Guinness | | 588 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Volco | | 589 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Giant malt | | 590 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Power malt | | 591 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Mighty malt | | 592 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Lion Malt | | 593 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other canned malt drinks(specify) | | 594 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Fruit Juice** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Don Simon | | 605 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Fru Telli | | 606 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Blue skies | | 607 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Junior | | 608 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Pure Heaven | | 609 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Kalipo | | 610 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Healthy Live | | 611 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Ceres | | 612 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other fruit drink (specify) | | 613 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **ALCOHOLIC BEVERAGES, TOBACCO AND NARCOTICS** | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Spirits** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Gin | | 618 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Whisky | | 619 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Akpeteshie | | 620 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

9.29

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES)

PART B: EXPENSES (FREQUENTLY PURCHASED ITEMS) PERSONS INTERVIEWED ID

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| ITEM | | C  O  D  E | 1.  How much was spent and what quantity was acquired of………...since my last visit? | | | 2.  How much was spent and what quantity was acquired of………...since my last visit? | | | 3.  How much was spent and what quantity was acquired of………...since my last visit? | | | 4.  How much was spent and what quantity was acquired of………...since my last visit? | | | 5.  How much was spent and what quantity was acquired of………...since my last visit? | | | 6.  How much was spent and what quantity was acquired of………...since my last visit? | | | |
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| Bitters (eg. Alomo, Agya Appiah, HerbAfric etc.) | | 621 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Schnapps | | 622 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Other spirits | | 623 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| **Wine** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Palm Wine | | 629 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Imported Wine | | 630 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Other local wine(specify) | | 631 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| **Beer** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| National beer (star/club) | | 635 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Dark beer (e.g. Guilder, Guinness) | | 636 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Beer (Imported) | | 637 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Traditional beer (Pito) | | 638 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| **Tobacco** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Cigarette | | 645 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Tobacco (processed) | | 646 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Other tobacco products(specify) | | 647 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| **Narcotics** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Kola Nuts | | 650 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| **Housing, water, Electricity, Gas and other fuels** | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Refuse collection | | 651 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Refuse disposal | | 652 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Expenditure on Public toilet | | 653 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| **Gas** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Gas for household use not for car | | 655 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| **Liquid Fuel** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Kerosene | | 657 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Other fuel and power(specify) | | 658 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| **Solid Fuel** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Charcoal | | 660 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Firewood | | 661 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Other solid fuel(specify) | | 662 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |

9. 30

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES)

PART B: EXPENSES (FREQUENTLY PURCHASED ITEMS) PERSONS INTERVIEWED ID

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| ITEM | | C  O  D  E | 1.  How much was spent and what quantity was acquired of………...since my last visit? | | | 2.  How much was spent and what quantity was acquired of………...since my last visit? | | | 3.  How much was spent and what quantity was acquired of………...since my last visit? | | | 4.  How much was spent and what quantity was acquired of………...since my last visit? | | | 5.  How much was spent and what quantity was acquired of………...since my last visit? | | | 6.  How much was spent and what quantity was acquired of………...since my last visit? | | |
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| **Heat energy** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Ice block (household cooling and refrigeration only) | | 663 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Furnishing, Household Equipment and Routine Household Maintenance** | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Washing powder** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Omo | | 665 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Ariel | | 666 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Yazz | | 667 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Kleesoft | | 668 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Sunlight powder | | 669 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other washing powder(specify) | | 670 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Washing soaps** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Sunlight soap | | 675 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Key soap | | 676 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Ameen soap | | 677 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Duck soap | | 678 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| BF | | 679 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Guardian | | 680 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other washing soap(specify) | | 681 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Bathing /toilet soaps (liquid or solids) and bleaches** | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Lux | | 687 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Rexona | | 688 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Medisoft | | 689 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Geshia | | 690 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other bathing soap(specify) | | 691 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Bleaches | | 692 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Disinfectants and cleaners | | 693 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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9.31

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES)

PART B: EXPENSES (FREQUENTLY PURCHASED ITEMS) PERSONS INTERVIEWED ID

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| ITEM | | C  O  D  E | 1.  How much was spent and what quantity was acquired of………...since my last visit? | | | 2.  How much was spent and what quantity was acquired of………...since my last visit? | | | 3.  How much was spent and what quantity was acquired of………...since my last visit? | | | 4.  How much was spent and what quantity was acquired of………...since my last visit? | | | 5.  How much was spent and what quantity was acquired of………...since my last visit? | | | 6.  How much was spent and what quantity was acquired of………...since my last visit? | | |
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| **Insecticides-coils and sprays** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Insecticides-coils | | 695 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Insecticides-sprays | | 696 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Other non-durable goods** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Matches | | 697 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Household candles | | 698 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Brooms | | 699 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Paper napkins (tissue) | | 703 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Kitchen paper roll | | 704 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Toilet bowl cleaner | | 705 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Shoe polish and brush | | 706 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Others** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Laundry services | | 708 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Health: Medical Products, appliances and equipment** | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Pain killers (paracetamol, APC, etc.) | | 710 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Antibiotics | | 711 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Anti-malaria medicines** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Artemether + Lumefantrine | | 712 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Artesunate ammodiaquin | | 713 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other anti-malaria medicine | | 714 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Other medicine** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Sulpha doxine | | 715 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Ibuprofen | | 716 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Metronidazole (Original) | | 717 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Metronidazole (Generic) | | 718 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Oral rehydration salts | | 719 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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9.32

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES)

PART B: EXPENSES (FREQUENTLY PURCHASED ITEMS) PERSONS INTERVIEWED ID

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| VISIT  day month day month day month day month day month day month | | | | | | | | | | | | | | | | | | | | | | |
| ITEM | | C  O  D  E | 1.  How much was spent and what quantity was acquired of………...since my last visit? | | | 2.  How much was spent and what quantity was acquired of………...since my last visit? | | | | 3.  How much was spent and what quantity was acquired of………...since my first visit? | | | 4.  How much was spent and what quantity was acquired of………...since my last visit? | | | 5.  How much was spent and what quantity was acquired of………...since my last visit? | | | 6.  How much was spent and what quantity was acquired of………...since my last visit? | | | |
|  | | | AMT (GH¢) | QTY | UNIT | AMT (GH¢) | | QTY | UNIT | AMT (GH¢) | QTY | UNIT | AMT (GH¢) | QTY | UNIT | AMT (GH¢) | QTY | UNIT | AMT (GH¢) | QTY | UNIT | |
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| **Other medical and pharmaceutical drugs** | | | | |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Absorbent cotton wool | | 722 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Disposable syringe for intramuscular injection | | 723 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| **Condoms** | |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Kiss condom | | 724 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Other condoms(specify) | | 725 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| **Traditional Ghanaian drugs(tablets or syrup)** | |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Kingdom Kookoo Capsules | | 800 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Adom tablets | | 801 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Abgeve syrup | | 802 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Other traditional drugs(specify) | | 803 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| **Other Medical Products** | |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Adhesive strips | | 807 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Contraceptive pills | | 808 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Diapers | | 809 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Other Medical Products (specify**)** | | 810 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| **Transport: Fuels and lubricants for personal transport equipment** | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Petrol | | 820 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Diesel | | 821 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Gas | | 822 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Other lubricants | | 823 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| **Other services in respect of personal transport equipment** | | | | | |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Car Washing | | 825 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Street parking/parking spaces services | | 826 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| **Passenger transport by railway** | |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
| Cost of travel by rail | | 827 |  | ////// |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  | |  |
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9.33

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES)

PART B: EXPENSES (FREQUENTLY PURCHASED ITEMS) PERSONS INTERVIEWED ID

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| ITEM | C  O  D  E | 1.  How much was spent and what quantity was acquired of………...since my last visit? | | | 2.  How much was spent and what quantity was acquired of………...since my last visit? | | | 3.  How much was spent and what quantity was acquired of………...since my last visit? | | | 4.  How much was spent and what quantity was acquired of………...since my first visit? | | | 5.  How much was spent and what quantity was acquired of………...since my last visit? | | | 6.  How much was spent and what quantity was acquired of………...since my last visit? | | |
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| **Bus fares (STC, Metro Mass Transport, Neoplan, etc.)** | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| STC | 829 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| VIP | 830 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| VVIP | 831 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Mass transport | 832 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Mini bus | 833 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Trotro, taxi & other transport** | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Trotro (Intra-city) | 835 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Mass transport (Intra-city) | 836 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Taxi (intra-city) | 837 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other transport (specify) | 838 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Cost of luggage and items transported unaccompanied** | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| One way public transport trip | 842 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Passenger transport by sea and inland water way** | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| River crossing (Big ferry) | 844 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| River crossing (Canoe) | 845 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Cost of travel by air** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Domestic flight two way | 846 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Domestic flight one way | 847 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Combined passenger transport** | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other purchased transport services | 848 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Porters (kayaye, male porters, etc.). | 849 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES)

PART B: EXPENSES (FREQUENTLY PURCHASED ITEMS) PERSONS INTERVIEWED ID

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| ITEM | C  O  D  E | 1.  How much was spent and what quantity was acquired of………...since my last visit? | | | 2.  How much was spent and what quantity was acquired of………...since my last visit? | | | 3.  How much was spent and what quantity was acquired of………...since my last visit? | | | 4.  How much was spent and what quantity was acquired of………...since my last visit? | | | 5.  How much was spent and what quantity was acquired of………...since my last visit? | | | 6.  How much was spent and what quantity was acquired of………...since my last visit? | | |
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| **Communication** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Postal services** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Postage | 850 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other postal services (e.g. DHL) | 851 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Internet/e-mail** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Prepaid Phone Card | 853 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Internet Services at Cyber Cafe | 854 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Post-Paid Telephone Service Package** | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Fixed line | 855 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Mobile | 866 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Other business communication charges** | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Scanning (1 Page) | 868 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Printing (1 Page) | 869 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Photocopying | 870 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **RECREATION AND CULTURE - Recreational and sporting services** | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Use of Gym facilities | 871 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Football game | 872 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Cultural services** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Cinema/theatre/Video houses | 873 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Rental of DVD Movie | 874 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Games of chance** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Safaribet | 875 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| National lotteries | 876 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other lotteries | 877 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES)

PART B: EXPENSES (FREQUENTLY PURCHASED ITEMS) PERSONS INTERVIEWED ID

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| ITEM | C  O  D  E | 1.  How much was spent and what quantity was acquired of………...since my last visit? | | | 2.  How much was spent and what quantity was acquired of………...since my last visit? | | | 3.  How much was spent and what quantity was acquired of………...since my last visit? | | | 4.  How much was spent and what quantity was acquired of………...since my last visit? | | | 5.  How much was spent and what quantity was acquired of………...since my last visit? | | | 6.  How much was spent and what quantity was acquired of………...since my last visit? | | | |
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| **Local newspaper (private)** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Crusading Guide | 880 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Insight News paper | 881 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Other private paper | 882 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **Newspapers and periodicals** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| National Daily Newspaper (Graphic) | 885 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| National Daily Newspaper (Times) | 886 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Other newspaper | 887 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Magazine | 888 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **National Sports Paper** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Graphic Sports | 889 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| International Weekly Newspaper | 890 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **Stationery and drawing materials** | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Exercise book | 891 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Writing pads | 892 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Other textbook, story books | 893 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Other expenditure on education not Sec2A | 894 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **Stationery: Wooden pencil** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| 2B | 895 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| HB | 896 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **Pen** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Bic | 897 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Allwrite | 898 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Pelikan | 899 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Other pen | 900 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Eraser | 901 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Sharpener | 902 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Other stationery | 903 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |

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SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES)

PART B: EXPENSES (FREQUENTLY PURCHASED ITEMS) PERSONS INTERVIEWED ID

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| **FOOD AND NON-ALCOHOLIC BEVERAGES** | | | | | | | | | | | | | | | | | | | |
| Pets and related products |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Tinned Dog Food | 905 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Tinned Cat Food | 906 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **RESTAURANTS AND HOTELS: Restaurants, cafe´ s and the like** | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Pizza | 907 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Khebabs and other meats | 908 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Cooked rice and stew | 909 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Fufu and light soup | 910 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other prepared meals (specify) | 911 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Canteens** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Cooked rice and stew | 915 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Fufu and light soup | 916 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Tuo zaafi | 917 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Kenkey/Banku with fried fish/sauce | 918 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Fried Plantain and beans (red red) | 919 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Khebabs | 920 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other prepared meals (specify) | 921 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Accommodation services** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Cost of bed occupancy in hotel/hostel | 923 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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9.37

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES)

PART B: EXPENSES (FREQUENTLY PURCHASED ITEMS) PERSONS INTERVIEWED ID

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|  | | | | | |  |  | |  |  | |  |
|  |  | ID | | | |  |  | |  | | |  |
| PERSON RESPONSIBLE |  |  |  |  |  | | |  | |  | |  |
| COPY FROM SECTION 6 Q.8 |  |  |  |  |  | | | | | | | |
|  |  |  |  |  |  | | | | | | | |
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| 2nd 3rd 4th 5th 6th 7th | | | | | | | | | | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| VISIT  day month day month day month day month day month day month | | | | | | | | | | | | | | | | | | | | |
| ITEM | | C  O  D  E | 1.  How much was spent and what quantity was acquired of………...since my last visit? | | | 2.  How much was spent and what quantity was acquired of………...since my last visit? | | | | 3.  How much was spent and what quantity was acquired of………...since my last visit? | | | 4.  How much was spent and what quantity was acquired of………...since my last visit? | | | 5.  How much was spent and what quantity was acquired of………...since my last visit? | | | 6.  How much was spent and what quantity was acquired of………...since my last visit? | | | |
|  | | | AMT (GH¢) | QTY | UNIT | AMT (GH¢) | QTY | UNIT | | AMT (GH¢) | QTY | UNIT | AMT (GH¢) | QTY | UNIT | AMT (GH¢) | QTY | UNIT | AMT (GH¢) | QTY | UNIT | |
| **MISCELLANEOUS GOODS AND SERVICES** | | | | | | | | | | | | | | | | | | | | | | |
| **Hairdressing salons and personal grooming establishments** | | | | | |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Men's haircut | | 925 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Hair wash & styling | | 926 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Braiding | | 927 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Manicure & pedicure | | 928 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Other personal grooming services | | 929 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **Wigs (Mesh Human/synthetic)** | |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Darling | | 935 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Auntie lizy | | 936 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Ultra | | 937 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Other hair | | 938 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Wigs | | 939 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **Other appliances, articles and products for personal care** | | | | | |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Toilet rolls | | 940 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Orange | | 941 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Tango | | 942 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Rose | | 943 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Other toilet roll | | 944 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **Toothpaste** | |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Pepsodent | | 949 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Close up | | 950 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Colgate | | 951 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Other toothpaste | | 952 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **Deodorant** | |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Blue ice | | 960 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Sure | | 961 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Rexona | | 962 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Fa | | 963 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Other deodorant | | 964 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |

9.38

SECTION 9: HOUSEHOLD EXPENDITURE (FOOD AND NON-FOOD EXPENSES)

PART B: EXPENSES (FREQUENTLY PURCHASED ITEMS) PERSONS INTERVIEWED ID

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | |  |  | |  |  | |  |
|  |  | ID | | | |  |  | |  | | |  |
| PERSON RESPONSIBLE |  |  |  |  |  | | |  | |  | |  |
| COPY FROM SECTION 6 Q.8 |  |  |  |  |  | | | | | | | |
|  |  |  |  |  |  | | | | | | | |
|  | | |  |  |  | | | | | | | |
| 2nd 3rd 4th 5th 6th 7th | | | | | | | | | | |

|  |
| --- |
| VISIT  day month day month day month day month day month day month |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ITEM | C  O  D  E | 1.  How much was spent and what quantity was acquired of………...since my last visit? | | | 2.  How much was spent and what quantity was acquired of………...since my last visit? | | | 3.  How much was spent and what quantity was acquired of………...since my last visit? | | | | 4.  How much was spent and what quantity was acquired of………...since my last visit? | | | 5.  How much was spent and what quantity was acquired of………...since my last visit? | | | 6.  How much was spent and what quantity was acquired of………...since my last visit? | | |
|  | | AMT (GH¢) | QTY | UNIT | AMT (GH¢) | QTY | UNIT | AMT (GH¢) | QTY | | UNIT | AMT (GH¢) | QTY | UNIT | AMT (GH¢) | QTY | UNIT | AMT (GH¢) | QTY | UNIT |
|  | | | | | | | | | | | | | | | | | | | | |
| **Disposable razor** |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |
| Bic | 968 |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |
| Lord | 969 |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |
| Gillette | 970 |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |
| Other erazor | 971 |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |
| **Body lotion/cream** |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |
| Queen Elizabeth | 975 |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |
| Vasline | 976 |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |
| Other (Specify) | 977 |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |
| **Skin powder(talcum)** |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |
| Azura | 980 |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |
| Dustin powder | 981 |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |
| Stay powder | 982 |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |
| Other skin powder | 983 |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |
| **Sanitary Pads** |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |
| Tampons | 984 |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |
| Always | 985 |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |
| Yazz | 986 |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |
| **Other financial services n.e.c.** | | | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |
| Fee for money transfer | 990 |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |

9.39

SECTION 9: PART C HOUSEHOLD FOOD INSECURITY

|  |  |  |
| --- | --- | --- |
| During **the last 12 MONTHS:** | | **Code** |
| "Yes" = 1"  No"= 2 "Don’t ‘know" = 8 "Refused" = 9 |
|
| 1 | Was there a time when you or others in your household worried about not having enough food to eat because of a lack of money or other resources? |  |
| 2 | Still thinking about the last 12 MONTHS, was there a time when you or others in your household were unable to eat healthy and nutritious food because of a lack of money or other resources? |  |
| 3 | Was there a time when you or others in your household ate only a few kinds of foods because of a lack of money or other resources? |  |
| 4 | Was there a time when you or others in your household had to skip a meal because there was not enough money or other resources to get food? |  |
| 5 | Still thinking about the last 12 MONTHS, was there a time when you or others in your household ate less than you thought you should because of a lack of money or other resources? |  |
| 6 | Was there a time when your household ran out of food because of a lack of money or other resources? |  |
| 7 | Was there a time when you or others in your household were hungry but did not eat because there was not enough money or other resources for food? |  |
| 8 | Was there a time when you or others in your household went without eating for a whole day because of a lack of money or other resources? |  |

9.40

SECTION 11: INCOME TRANSFERS AND MISCELLANEOUS INCOME & EXPENDITURES

PART A: TRANSFER PAYMENTS MADE BY HOUSEHOLD (INTERNAL REMITTANCES)

|  |  |  |
| --- | --- | --- |
| 1  Is there any member of the household who lives away from here?  Yes………………….1  No…………………..2  (>> 3) | 2  Has this household sent (NAME) any money or goods in the past 12 months?  Yes, money…………………….1  Yes, goods……………………..2  Yes, both money/goods…..……3  No ……………………………..4 | 3  Is there anyone else who is not a household member to whom this household has sent money or goods in the past 12 months?  Yes ……………………………..1  No ……………………………...2  **(IF ANSWERS TO Q.1 & Q.3 ARE NO, >> PART B Q.2)**  **(IF ANSWERS TO Q.2 & Q.3 ARE NO, >> PART B Q.1)** |
|  |  |  |

RESPONDENT: HOUSEHOLD HEAD OR MAIN RESPONDENT

|  |
| --- |
| **NOTE: REMITTANCES AND GOODS LISTED HERE DO NOT INCLUDE PAYMENTS MADE BY THE HOUSEHOLD FOR LABOUR SERVICES. THOSE EXPENDITURES ARE COVERED IN SECTION 9** |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 4  **LIST EACH PERSON’S NAME TO WHOM CASH AND / OR GOODS WERE SENT BY THE HOUSEHOLD**  **(IF NOT A HOUSEHOLD MEMBER >> 6**) | 5  **ID CODE IF PERSON IS AN ABSENT MEMBER OF THE HOUSEHOLD THEN (>>8)** | **IF NOT A HOUSEHOLD MEMBER, RELATIONSHIP TO THE HOUSEHOLD HEAD AND SEX** | | 8  Were these remittances made on a regular basis?  Yes, Weekly…………1  Yes, Monthly………...2  Yes, Quarterly……….3  Yes, Annually………..4  Yes, other (specify) ..5  No…………………...6 | 9  What was the total amount of cash sent or given to this individual during the past 12 months?  IF NO CASH (>>11) | 9a  In the most recent  remittance sent, what was  the cost incurred by the remitter?  **( IF DON’T KNOW CODE DK)** | 10  What were the 3 main uses of cash sent/given?  Daily consumption……1  Housing………...2  Business………..3  Education……....4  Health………….5  Funerals……..…6  Other  ...ceremonies......7  Savings….......... 8  Other,(specify)….9 | | | 11  What was the total value of food sent or given to this individual during the past 12 months?  **IF NO FOOD**  **CODE 00** | 12  What was the value of other goods (non-food items) sent or given to this individual during the past 12 months?  **IF NO GOODS**  **CODE 00** | 13  Where does this recipient live?  This town/village….01  Sekondi/Takoradi…02  Cape Coast………..03  Accra………..…….04  Ho…….……..…….05  Koforidua……..…..06  Kumasi………..…..07  Sunyani……………08  Tamale…..……..….09  Bolgatanga……..….10  Wa……………..…..11  Other urban………..12  Rural…..………..…13 |
| 6  RELATIONSHIP  Parent………….1  Spouse…………2  Child………..….3  Brother /Sister ...4  Other relative….5  Non-relative...…6 | 7  SEX  Male…………1  Female………2 |
| AMOUNT (GH¢) | AMOUNT (GH¢) | 1st | 2nd | 3rd | VALUE (GH¢) | VALUE (GH¢) |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
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11.1

SECTION 11: INCOME TRANSFERS AND MISCELLANEOUS INCOME & EXPENDITURES

PART B: TRANSFER PAYMENTS RECEIVED BY HOUSEHOLD (INTERNAL REMITTANCES)

RESPONDENT: HOUSEHOLD HEAD OR MAIN RESPONDENT

|  |  |
| --- | --- |
| 1  During the past 12 months has this household received or collected money or goods from ……………………………..  **(NAME OF ABSENT HOUSEHOLD MEMBER)?**  Yes, cash…………………….1  Yes, goods…………………...2  Yes, both cash/goods…..…….3  No …………………………..4 | 2  During the past 12 months, has this household received or collected money or goods from any other individual?  Yes, cash…………………….1  Yes, goods…………………..2  Yes, both cash/goods…..…..3  No ………………………….4  **(IF ANSWERS TO Q.1 AND Q.2 ARE NO, >> PART C)** |
|  |  |

|  |
| --- |
| **NOTE: TRANSFERS IN THIS SECTION SHOULD NOT INCLUDE PAYMENTS MADE TO THE HOUSEHOLD FOR GOODS AND SERVICES OR FOR WORK DONE BY THE HOUSEHOLD.**  **THESE INCOMES ARE COVERED IN SECTIONS 4, 8, AND 10** |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 3  **LIST EACH PERSON’S NAME FROM WHOM HOUSEHOLD RECEIVED MONEY OR GOODS.**  **(IF NOT A HOUSEHOLD MEMBER >>5)** | 4  **ID CODE IF PERSON IS AN ABSENT MEMBER OF THE HOUSEHOLD THEN (>> 7)** | **IF NOT A HOUSEHOLD MEMBER, RELATIONSHIP TO THE HOUSEHOLD HEAD AND SEX** | | 7  Were these remittances made on a regular basis?  Yes, Weekly………….1  Yes, Monthly…….........2  Yes, Quarterly………...3  Yes, Annually………...4  Yes, other. (specify) ….5  No………………….....6 | 8  Will you have to repay these?  Yes………….1  No…………..2 | 9  What was the total amount of the cash this household received from this individual during the past 12 months?  **IF Q.9=0**  **(>> 12)** | 9a  In the most recent remittance received, how much did (NAME) have to pay to receive the money?  **(IF NO COST 0)** |
| 5  RELATIONSHIP  Parent………..…...1  Spouse………...…2  Child…………......3  Brother /Sister .….4  Other relative…....5  Non-relative…......6 | 6  SEX  Male……………..…1  Female……………..2 |
| AMOUNT (GH¢) | AMOUNT (GH¢) |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
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11.2

SECTION 11: INCOME TRANSFERS AND MISCELLANEOUS INCOME & EXPENDITURES

PART B: TRANSFER PAYMENTS RECEIVED BY HOUSEHOLD (INTERNAL REMITTANCES)

|  |
| --- |
| **NOTE: TRANSFERS IN THIS SECTION SHOULD NOT INCLUDE PAYMENTS MADE TO THE HOUSEHOLD FOR GOODS AND SERVICES OR FOR WORK DONE BY THE HOUSEHOLD.**  **THESE INCOMES ARE COVERED IN SECTIONS 4, 8, AND 10** |

RESPONDENT: HOUSEHOLD HEAD OR MAIN RESPONDENT

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 10  How did (NAME) usually send this money to your household?  Bank transfers (cheques, drafts,  direct deposits, etc)…………………1  Post Office…………………………..2  Agent/Courier(DHL)………………..3  Friends/Relations……………………4  Brought home by migrant…………..5  MTN MMT…………………………6  TIGO MMT…………………………7  Airtel MMT…………………………8  Vodafone MMT…………………….9  Other (specify)…………………….10 | 11  What were the 3 main uses of the cash received?  Daily consumption…...…...1  Housing………………..….2  Business……………..……3  Education………….….…..4  Health………………..……5  Funerals……………...........6  Other ceremonies….….…..7  Savings………………..….8  Other ………………...……9  (specify) | | | 12  What was the total value of food received from this individual during the past 12 months?  **IF NO FOOD**  **CODE 00** | 13  What was the value of other goods (non-food items) received from this individual during the past 12 months?  **IF NO GOODS**  **CODE 00** | 14  Where does this sender live?  This town/village…………………...01  Sekondi/Takoradi…………………..02  Cape Coast…………………..………03  Accra………………………...……..04  Ho………………………...…….….05  Koforidua……………..…………….06  Kumasi……………………..……….07  Sunyani…………………..…………08  Tamale…………………..………….09  Bolgatanga………………...………..10  Wa…………………….……...……..11  Other urban…………………..……..12  Rural………………………..…..….13 |
| 1sts | 2nd | 3rd | VALUE (GH¢) | VALUE (GH¢) |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
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11.3

SECTION 11: INCOME AND MISCELLANEOUS INCOME & EXPENDITURES

PART C: MISCELLANEOUS INCOME

During the past 12 months, did any member of the household receive income in cash or kind from the following sources: social security, state pension, LEAP, retirement benefits, bride price or inheritance, other sources? (**CIRCLE APPROPRIATE RESPONSES)**

SSNIT………………A STATE PENSION……………….B LEAP………………..C NONE……………….2 (>>PART 11D)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| M  E  M  B  E  R    I  D | RE  S  P  O  N  D  E  N  T | FROM CENTRAL GOVERNMENT | | | | | | | | | | | | | | | | | |
| Social Security (SSNIT) | | | | | | State Pension (CAP 30) | | | | | | LEAP | | | | | |
| 1  When did (NAME) get enrolled in this programme | | 2  When did (NAME) last receive a payment? | | 3  How much did (NAME) receive during the last payment? | 4  How many times over the past 12 months has (NAME) received the payment? | 5  When did (NAME) get enrolled in this programme | | 6  When did (NAME) last receive a payment? | | **7**  How much did (NAME) receive during the last payment? | **8**  How many times over the past 12 months has (NAME) received the payment? | 9  When did (NAME) get enrolled in this programme | | 10  When did (NAME) last receive a payment? | | 11  How much did (NAME) receive during the last payment? | 12  How many times over the past 12 months has (NAME) received the payment? |
| MM | YYYY | MM | YYYY | AMOUNT (GH¢) | NUMBER | MM | YYYY | MM | YYYY | AMOUNT (GH¢) | NUMBER | MM | YYYY | MM | YYYY | AMOUNT (GH¢) | NUMBER |
| 01 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 02 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 03 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 04 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 05 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 06 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 07 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 08 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 09 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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11.4

SECTION 11: INCOME AND MISCELLANEOUS INCOME & EXPENDITURES

PART C: MISCELLANEOUS INCOME -CONTINUED

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| MEMBER  I  D | R E  S  P  O  N  D  E  N  T | OTHER SOURCES | | | | | | | FROM CENTRAL GOVERNMENT | | | | OTHER SOURCES | | | | | | | | | |
| Retirement Benefits | | | | | | | Social Intervention Program | | | | Bride price or inheritance | | | | **OTHER (SPECIFY)**  **INCL. DONATIONS FROM CHURCHES, INSTITUTIONS, DIVIDENDS, INTEREST.**  **(EXCLUDE SUSU)** | | | | | |
| 13  When did (NAME) get enrolled in this programme | | 14  When did (NAME) last receive a payment? | | | 15  How much did (NAME) receive during the last payment? | 16  How many times over the past 12 months has (NAME) received the payment? | 16i  Which of these did (NAME) benefit from?  **(MULTIPLE)**  Textbooks………….A  School Uniform……B  Footwear…………...C  School feeding……..D  Gov’t scholarship…..E | | | | 17  When did (NAME) last receive a payment? | | 18  How much did (NAME) receive during the last payment? | 19  How many times over the past 12 months has (NAME) received the payment? | 20  When did (NAME) get enrolled in this programme | | 21  When did (NAME) last receive a payment? | | 22  How much did (NAME) receive during the last payment? | 23  How many times over the past 12 months has (NAME) received the payment? |
| MM | YYYY | MM | YYYY | | AMOUNT (GH¢) | NUMBER | MM | YYYY | AMOUNT (GH¢) | NUMBER | MM | YYYY | MM | YYYY | AMOUNT (GH¢) | NUMBER |
| 01 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 02 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 03 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 12 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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11.5

(SUSU NOT INCLUDED – SEE SECTION 12B)

SECTION 11: INCOME AND MISCELLANEOUS INCOME & EXPENDITURES

PART D: MISCELLANEOUS OUTGOINGS (EXPENDITURES)

During the past 12 months, how much did the household spend (in cash and in kind) on?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1  Taxes  (TV license, property rate, etc.). | 2  Contribution to self-help projects. | 3  Weddings, bride price, funerals and other ceremonies. | 4  Gifts and presents excluding those mentioned as transfers.  **(INCLUDE CONTRIBUTIONS/ DONATIONS TO CHURCHES, INSTITUTIONS, ETC)** | 5  Other miscellaneous expenditure.  **(EXCLUDE SUSU)** |
| AMOUNT (GH¢) | AMOUNT (GH¢) | VALUE (GH¢) | VALUE (GH¢) | AMOUNT (GH¢) |
|  |  |  |  |  |
|  |  |  |  |  |

11.6

SECTION 11.E1: MIGRATION AND REMITTANCES --- RESPONDENT: HEAD OF HOUSEHOLD, FORMER MIGRANT, OR ANY WELL INFORMED HOUSEHOLD MEMBER

PART A: RETURNED MIGRANT – PAST 5 YEARS

INTERVIEWER: I would now like to ask you questions about household members who used to live elsewhere and have re-joined this household in the past 5 years.

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| M  E  M  B  E  R  I  D | I  D  O  F  R  E  S  P  O  D  E  N  T | 1  **LIST OF MIGRANTS** | 1A  Within the past 5 years, Was (NAME) previously living outside your household and has since returned to your household?  Yes..............................1  No................................2  ( >> SECTION 11E2) | | 2  What was the main activity of (NAME) when he/she lived outside your household?  Working only………...1  Studying only………...2  (>> to Next Member)  Working and Studying.3  Other (specify)……….4  (>> to Next Member)  **(IF 2 OR 4 SKIP TO NEXT MEMBER)** | 3  If (NAME) was working or working and studying outside the household, where did (NAME) live and work?  Urban Ghana…………..01  Rural Ghana…………...02  UK……………………..03  USA…………………....04  Germany……………….05  Italy……………………06  Canada…………………07  Holland………………...08  Spain…...……………...09 Belgium………………..10  South Africa………. …11  Nigeria…………………12  Ivory Coast…………….13  China…..………………14  Other ECOWAS……….15  Other Africa… ……....16  Dubai…… … ………...17  Togo……………… …18 Burkina Faso…… …...19  Other (Specify)………...20  (IF 03-17 SKIP TO Q.5) | 4  If (NAME) lived and worked in Ghana, which region did he/she work in?  Western…….01  Central……...02  Gt. Accra….……03  Volta…....…..04  Eastern……...05  Ashanti……..06  Brong Ahafo..07  Northern……08  Upper East….09  Upper West…10 | 5  During the past 5 years, for how long did (NAME) live and work outside your household?  **(CODE ZERO IF LESS THAN ONE YEAR)** | 6  Before (NAME) left to work outside your household, did you give him/her or did (NAME) receive donation (cash) or a loan to help finance migration?  Yes……….1  No………..2 | 7  Before (NAME) left to work outside your household, what was the highest level of education that he/she completed?  None...............................00  Kindergarten..................01  Primary...........................02  JSS/JHS..........................03  Middle............................04  SSS/SHS........................05  Secondary.......................06  Voc/Tech/Comm............07  Teacher Training/Agric  Nursing/Cert...................08  Post Sec. Dip (HND,  Teacher training, Nursing, Unive. Dip…………......09  Bachelor degree.............10  Post graduate.................11  Don’t know……………98 | 8  Before (NAME) left to work outside the household, where did (NAME) complete the highest level of education?  Ghana……..…..1  Outside Ghana…2  N/A…………….3 |
|  | YEARS |
|  | | | |  | | | | | | | |
| 01 |  |  |  | |  |  |  |  |  |  |  |
| 02 |  |  |  | |  |  |  |  |  |  |  |
| 03 |  |  |  | |  |  |  |  |  |  |  |
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| 09 |  |  |  | |  |  |  |  |  |  |  |
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| 10 |  |  |  | |  |  |  |  |  |  |  |
| 11 |  |  |  | |  |  |  |  |  |  |  |
| 12 |  |  |  | |  |  |  |  |  |  |  |
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| 13 |  |  |  | |  |  |  |  |  |  |  |
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11.7

SECTION 11.E1: MIGRATION AND REMITTANCES --- RESPONDENT: HEAD OF HOUSEHOLD, FORMER MIGRANT, OR ANY WELL INFORMED HOUSEHOLD MEMBER

RETURNED MIGRANT – PAST 5 YEARS

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| I  D  O  F  R  E  S  P  O  N  D  E  N  T | 9  What was the occupation of (NAME) when he/she lived and worked outside your household?  **WRITE NAME AND CODE OF OCCUPATION OR CODE AS FOLLOWS**  Looking for work..............................9997  Other non-economic activity............9998  No activity……………… ……9999 | | 10  When (NAME) lived and worked outside your household, did he/she send any money to your household?  Yes…………….1  No……………..2  (>> SECTION 11E2) | 11  How did (NAME) usually send this money to your household?  MTO (Western Union, MoneyGram, Vigo, Fast Money Transfer ……….1  Bank Account………………….….2  Post Office………………………...3  Friends/Relations……………….…4  Brought home by migrant…………………………....5  MTN MMT…………………….....6  TIGO MMT……………………....7  Airtel MMT.……………………...8  Vodafone MMT……......................9  Other (specify)…………………..10 | 12  How much money did (NAME) send on the average to your household per year?  **(PROBE FOR ACCURATE DETAILS.**  **REFER TO Q.5 ON PAGE 11.1)**  **(IN GHANA CEDIS ONLY)** |
| M A I N  O C C U P A T I O N | ISCO  CODE | AMOUNT |
| 01 |  |  |  |  |  |
| 02 |  |  |  |  |  |
| 03 |  |  |  |  |  |
| 04 |  |  |  |  |  |
| 05 |  |  |  |  |  |
| 06 |  |  |  |  |  |
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11.8

SECTION 11.E2: MIGRATION AND REMITTANCES --- RESPONDENT: HEAD OF HOUSEHOLD OR ANY WELL INFORMED HOUSEHOLD MEMBER.

CURRENT MIGRANT Now I would like to ask you about all household members.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| L  I  N  E  N  U  M  B  E  R | R  E  S  P  O  D  E  N  T  ID | 1  Is/Are there any former household member(s) who is/are currently living outside your household?  **(CIRCLE THE APPROPRIATE RESPONSE)**  Yes........................................1  No……….............................2  ( >> SECTION 12A) | 2  What is the sex of (NAME) who is currently living outside your household?  Male………1  Female…....2 | 3  How old is (NAME) who is currently living outside your household? | 4  What is the relation of (NAME) to the head of the household?  Spouse……………………1  Son/Daughter…………….2  Son/Daughter-in-law……..3  Father/Mother…………….4  Brother/Sister………….….5  Parent-in-law……..………6  Other Relative…………….7  Servant……………………8  Other Non-Relative……….9 | 5  What is the main reason why (NAME) is currently living outside the household?  Marriage……………….1  Education………………2  Work…………………...3  Join parents…………….4  Join other relatives……..5  Other (specify)…………6 | 6  Is (NAME) who is currently living outside your household, working or looking for work?  Yes, currently  working………….1  Yes, currently  looking for work....2  Neither……………..3  Don’t know…………4 | 7  At present where does (NAME) live?  Urban Ghana…………..01  Rural Ghana…………...02  UK……………………..03  USA…………………....04  Germany……………….05  Italy……………………06  Canada…………………07  Holland………………...08  Spain…………………...09  Belgium………………..10  South Africa……………11  Nigeria…………………12  Ivory Coast…………….13  China…..………………14  Other ECOWAS……….15  Other Africa…………....16  Dubai…………………...17  Togo……………………18  Burkina Faso…………...19  Other (Specify)………...20  (IF 03-20 SKIP TO Q.9) |
| **NAME OF FORMER HOUSEHOLD MEMBER LIVING OUTSIDE THE HOUSEHOLD** | Y E A R S |
| 01 |  |  |  |  |  |  |  |  |
| 02 |  |  |  |  |  |  |  |  |
| 03 |  |  |  |  |  |  |  |  |
| 04 |  |  |  |  |  |  |  |  |
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| 12 |  |  |  |  |  |  |  |  |
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| 15 |  |  |  |  |  |  |  |  |

11.9

SECTION 11.E2: MIGRATION AND REMITTANCES --- RESPONDENT: HEAD OF HOUSEHOLD OR ANY WELL INFORMED HOUSEHOLD MEMBER.

CURRENT MIGRANT - CONTINUED

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| MEMB E R  I  D | 8  If (NAME) lives and works in Ghana, in which region is he/she working?  **CHECK IF 11E2 Q6=3 >>Q15**  Western………..01  Central…………02  Gt. Accra………03  Volta…………..04  Eastern………...05  Ashanti………..06  Brong Ahafo…..07  Northern………08  Upper East…….09  Upper West……10 | 9  How long has (NAME) lived and worked there? | 10  Before (NAME) left to work outside your household, what was his/her marital status?  Married……………1  Consensual Union...2  Separated…………3  Divorced………….4  Widowed…………5  Never Married……6 | 11  Before (NAME) left to work outside your household, what was the highest level of education that he/she completed?  None...................................00  >>13  Kindergarten.......................01  Primary...............................02  JSS/JHS..............................03  Middle................................04  SSS/SHS............................05  Secondary...........................06  Voc/Tech/Comm................07  Teacher Training/  Agric Nursing/Cert.............08  Post Sec. Dip (HND,  Teacher training,  Nursing, Unive. Dip………09  Bachelor degree..................10  Post graduate.......................11  Don’t know……………….98 | 12  Before (NAME) left to work outside your household, where did (NAME) complete the highest level of education?  Ghana……..…..1  Outside Ghana…2  N/A…………….3 | 13  Before (NAME) left to work outside your household, did you give him/her a grant or a loan to help finance migration in part or in full?  Yes, in full………….1  Yes, in part………....2  No…………………..3 | | 14  Before (NAME) left to work outside your household, what was his/her occupation?  **WRITE NAME AND CODE OF OCCUPATION OR CODE AS FOLLOWS**  Full time education...........................................9996  Looking for work..............................................9997  Other activity (Non- economic)........................9998  No activity……………………………….……9999 | | |
| TOTAL YEARS | M A I N O C C U P A T I O N | | I S C O C O D E |
|  | | | | | | | | | | |
| 01 |  |  |  |  |  | |  | |  |  |
| 02 |  |  |  |  |  | |  | |  |  |
| 03 |  |  |  |  |  | |  | |  |  |
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11.10

SECTION 11.E2: MIGRATION AND REMITTANCES --- RESPONDENT: HEAD OF HOUSEHOLD OR ANY WELL INFORMED HOUSEHOLD MEMBER.

CURRENT MIGRANT

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| M E M B E R  I  D | 15  What is (NAME’s) current marital status?  Married……………1  Consensual Union...2  Separated………….3  Divorced…………..4  Widowed………….5  Never Married…….6  DK………………...7 | | 16  What is (NAME’s) current occupation while living and working outside the household?  **WRITE NAME AND CODE OF OCCUPATION OR CODE AS FOLLOWS**  Full time education............................................9996  Looking for work..............................................9997  Other activity (Non- economic)........................9998  No activity……………….……………………9999 | | 17  Does (NAME) send any money to your household?  Yes money only.....1  Yes goods only......2  (>> 22)  Yes both …….......3  No..........................4  (>> 25) | 18  Who in your household usually receives this money?  Head………………………01  Spouse…………………….02  Son/Daughter……………..03  Son/Daughter-in-law……...04  Father……………………..05  Mother…………………….06  Brother/Sister………….….07  Parent-in-law……..……….08  Other Relative…………….09  Other Non-Relative……….10  Other (specify)……………11 | 18a  Who decides on how this money received should be spent?  **CODE 77**  **IF REMITTER AND 88 FOR OTHER NON HOUSEHOLD MEMBERS** | 19  How does (NAME) usually send this money to your household?  MTO (Western Union, Moneygram, Vigo, Fast Money Transfer)……….1  Bank Account………….2  Post Office……………..3  Friends/Relations………4  Brought home by migrant………………...5  MTN MMT…………....6  TIGO MMT…………...7  Airtel MMT.…………..8  Vodafone MMT…….....9  Other (specify)………..10 | 20  In the past 12 months, how many times has (NAME) sent money to your household?  Once…………………….1  Two times……………….2  Three times……...………3  Four times…………...…..4  Every month……………..5  Other (specify)…………..6 | |
| M A I N O C C U P A T I O N | I S C O C O D E | ID |
|  | |  | | | | | | | | |
| 01 |  | |  |  |  |  |  |  | |  |
| 02 |  | |  |  |  |  |  |  | |  |
| 03 |  | |  |  |  |  |  |  | |  |
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| 12 |  | |  |  |  |  |  |  | |  |
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11.11

SECTION 11.E2: MIGRATION AND REMITTANCES --- RESPONDENT: HEAD OF HOUSEHOLD OR ANY WELL INFORMED HOUSEHOLD MEMBER.

CURRENT MIGRANT

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| M E M B E R  I  D | 21  In the past 12 months, how much money in total has been sent to…. | |  | 22  What is the value of goods that has sent/brought to ….. in the past 12 months?  **(IN GHANA CEDIS ONLY)** | |  | 24  Which of these under listed goods were sent/brought to your household in the past 12 months?  **(MULTIPLE RESPONSES)** | |
| **IF NOTHING WAS SENT CODE 00**  **(IN GHANA CEDIS ONLY)** | | **i**  Yes…………1  No………….2  (>> Next Item)     1. Refrigerators/Deep freezers…………… …………. 2. TV……………………………………… ………… 3. Hifi system……………………………… ………… 4. Washing machine………………………. ………… 5. Set of furniture………………………….. ………… 6. Microwave……………………………… ………… 7. Air conditioners………………………… ………… 8. Computer and accessories……………… ………… 9. DVCD/DVD/Video……………………. ………… 10. Motorbike………………………………. ………… 11. Cars……………………………………. ………… 12. Buses………………………………….. ………… 13. Trucks………………………………… ………… 14. Corn mill……………………………….. ………… 15. Set of hair dressing equipment………… ………… 16. Sewing machine………………………. ………… 17. Tractor………………………………… ………… 18. Other agriculture equipment………….. ………… 19. Mobile phones………………………… ………… 20. Other (specify)………………………… ………… | ii  **QUANTITY** |
| A M O U N T | | VALUE | |
| GH¢ | GHp | GH¢ | GHp |
|  | | | | | |
| 01 |  |  |  |  |  |
| 02 |  |  |  |  |  |
| 03 |  |  |  |  |  |
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| 04 |  |  |  |  |  |
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| 14 |  |  |  |  |  |
| 15 |  |  |  |  |  |

11.12

SECTION 11.E2: MIGRATION AND REMITTANCES --- RESPONDENT: HEAD OF HOUSEHOLD OR ANY WELL INFORMED HOUSEHOLD MEMBER.

CURRENT MIGRANT

|  |  |  |  |
| --- | --- | --- | --- |
| 25. Have you or any other member(s) of your household received remittances from a previous  household member(s) to open an account?  .  Yes, for remitter…………………1  Yes, for household member(s)….2  No………………………………3  26. Did your household set up a business or open a store after NAME(S) went  to work outside the household?    Yes, set up a business……………1  Yes, open a store…………………2  No……………………………….3  27. Did your household build a dwelling to rent to others /for other commercial  uses after NAME(S) went to work outside the household?    Yes, for rent………………………..1  Yes, for other commercial uses……2  Yes, for both……………………….3  No………………………………….4  28. Have you or any other member(s) of your household received remittances from a previous  household member(s) to purchase land?  Yes, building for remitter………………………….…1  Yes, building for household member(s)………………2  Yes, farmland for remitter………………………….…3  Yes, farmland for household member(s)……………..4  Yes, both for building and farmland for remitter…......5  No…………………………………………………......6 |  |  | 29. Did you use the remittances for: ……………………  Yes…………1 No………….2  **(MULTIPLE RESPONSE)**   1. Education………………………………………… 2. Improvement to dwelling………………………... 3. Funeral…………………………………………… 4. Setting up a business……………………………. 5. Pay for religious activities……………………… 6. Putting up a housing unit………………………. 7. Pay household utilities.………………………… 8. Apprenticeship…………………………………. 9. Wedding/Engagement………………………….. 10. Medical………………………………………… 11. Farming equipment……………………………. 12. Family emergencies…………………………… 13. Pay Rent…. ………………………………….. 14. Daily upkeep…………………………………. 15. Financial investment…………………………… 16. Pay for debt…………………………………… 17. Other (specify)……………………………….. |

11.13

SECTION 12: CREDIT, ASSETS, SAVINGS AND USE OF FINANCIAL SERVICES

PART A: FINANCIAL SERVICES

RESPONDENT: THE HEAD OF HOUSEHOLD OR MAIN RESPONDENT

(INTERVIEWER: ENSURE THAT THE FULL LIST OF CREDIT ARRANGED BY THE HOUSEHOLD IS ENUMERATED HERE, INCLUDING ITEMS OF CREDIT ALREADY LISTED IN SECTIONS 8 AND 10).

PART A: ALL HOUSEHOLD MEMBERS 5 YEARS AND OLDER

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| M  E  M  B  E  R  I  D | 1  Does (NAME) have a bank account or is contributing to a loan/savings scheme?  Yes…….1 (>> 3)  No……...2 | 2  What is the main reason why (NAME) does not have a bank account and is not contributing to a loan/savings scheme?  Not necessary/interested..…….1  Not aware of one…….………..2  Process cumbersome.…………3  Financial institution too  far away………………………4  Don’t have enough money  or income…………….….…...5  Don’t have regular income..….6  Other (specify)………………..7  >>7  >>> | 3  In what type of financial institution is (NAME’s) account or contribution being held?    **(MULTIPLE RESPONSES**)  Commercial bank………….A  Investment/mortgage………B  Community/rural bank….....C  Savings and loans Scheme…………………....D(.>>6)  Cooperative/credit Union ...E (>>6)  Susu scheme………………F  Mobile money…………….G (>>6)  Other (specify)…................H | | | | | | | 4  What type of account is being held by (NAME) in the financial institution?  **(MULTIPLE RESPONSES)**  Current or  cheque A/C..................A  Investment account…..B  Savings account..…….C  Susu account ……… ..D  Fixed deposit A/C.…...E  E-zwich account….......F  Other (specify)…..… ..G | | | | | | 5  Which of the following bank transaction products is (NAME) using?  **(MULTIPLE RESPONSES)**  Cheque book…..A  ATM card……...B  E-zwich………..C  e-banking……...D  Other (specify…E | | | | | 6  How did (NAME) get to know about the financial institution where the account is being held?  Radio…………………………1  Television………..…………..2  Newspaper/Magazine………..3  Colleagues/Relatives………...4  Representative from the  financial institution….……..5  Employer/Union Leaders……6  Community/Assoc. Leaders…7  ICT medium…………………8  Other (specify)………………9 | 7  Has (NAME) applied for a loan in the past 12 months?  Yes ...........1  No……….2  **( >>** 15**)** | 8  What is/was the status of the loan application?  Granted…………..1  Processing………..2  (>> 16)  Not granted………3  (>> 14)  **MULTIPLE RESPONSE** | | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | A | B | C |
| 01 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 02 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 03 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 04 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 05 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 06 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 07 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 08 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 09 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 13 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 14 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 15 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

12.1

SECTION 12: CREDIT, ASSETS, SAVINGS AND USE OF FINANCIAL SERVICES

PART A: FINANCIAL SERVICES

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| M  E  M  B  E  R  I  D | 9  What is the source of this loan?  State Bank………….01  Private Bank………..02  Cooperative…………03  Gov’t Agency………04  NGOs……………….05  Business firm……….06  Employer…………...07  Money lender……….08  Savings and loans  scheme...................09  Susu scheme..............10  Trader………….……11  Farmer………………12  Relative/Friend/  Neighbour…………13  Other (specify)….…..14  A B C | | | 10  What was the total amount of the loan?  **ALL LOANS GRANTED** | | 11  What is the main purpose for the loan contracted?  a) **Family**  For meeting day-to-day expenses.............................................................01  For emergency (funeral, medical, etc)......................................................02  To pay off debts........................................................................................03  To pay off someone else’s debts...............................................................04  For social reasons such as wedding, travel or bride price.........................05  For education of self, children, siblings or others.....................................06  For renting your family’s apartment.........................................................07  b) **Assets**  For purchasing or building a house...........................................................08  Improving your house...............................................................................09  To acquire household assets or property other than car or motorcycle......10  For purchasing a car, motorcycle/bicycle..................................................11  For purchasing land....................................................................................12  c) **Agriculture and fishing**  For purchasing of livestock e.g. fish, cattle etc..........................................13  For agricultural improvements e.g. Irrigation, a dam, fencing,  preparing land........................................................................................14  For agricultural implements e.g. plough, hoe etc. .....................................15  For agricultural inputs e.g. seeds, fertilizer...............................................16  For fishing equipment e.g. net, outboard motor etc. ................................17  d) **Business**  For expanding your business/buy business stock .....................................18  For starting a business...............................................................................19  For investing in someone else’s business..................................................20  e) **other (specify)** .............................................................................................21  A B C | | | 12  What kind of guarantee/collateral was required by the lender?  None……......………….01  Land………...................02  Cattle………..................03  House/Building..............04  Employer……................05  Relatives….....…………06  Non-relative...................07  Land title (with or  without a house) ..........08  Salary channelled through  lending institution......... 09  Vehicle documents..........10  Cash or bank account or  loan guarantee fund.......11  Third party security.........12  Other (specify).................13  A B C | | | 13  How much of the loan has been repaid during the past 12 months (incl. charges and interest and any payment in kind)?  >>16 | | 14  Why was the loan refused?  Could not provide  collateral..............1  Salary or income  too low................2  Could not get a  guarantor.............3  Amount applied  for too high..........4  Previous debt  Problems.............5  Inappropriate  purpose of loan....6  Other (specify)….....7  >>16 |
| AMOUNT | | AMOUNT | |
| GH¢ | GHp | GH¢ | GHp |
| 01 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 02 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 03 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 04 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 09 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 11 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 13 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 14 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 15 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

12.2

SECTION 12: CREDIT, ASSETS, SAVINGS AND USE OF FINANCIAL SERVICES

PART A: FINANCIAL SERVICES

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| M  E  M  B  E  R  I  D | 15  What is the main reason for not trying to obtain a loan?  No need..................................................1  Interest rate too high…………………..2  Demand for collateral.............................3  Already has too much debt....................4  Cannot obtain the amount needed.........5  Other (specify).......................................6 | 16  Do you have an insurance policy/cover?  Yes...........1 (>>18)  No............2 | 17  Why do you not have any insurance policy/cover?    Do not see it necessary........................................1  Cannot afford it ...................................................2  Insurance companies are deceptive....................3  Inadequate compensation....................................4  Don’t know what insurance is /how it works......5  Procedure for claims takes too long...................6  Other (specify).....................................................7  >>PART 12B BB | 18  What type of short-term insurance policy/cover do you have?  Vehicle/motor......................A  Medical...............................B  Funeral.................................C  Property...............................D  Commercial or business.......E  Travel...................................F  None.....................................G  Other (specify).....................H | | | | | | | | 19  What type of long-term insurance cover do you have?  Life insurance  (Premium paid  by holder)..........................A  Life insurance  (Premium paid by  employer).........................B  Retirement annuity/plan.........C Education ...............................D  Other endowment/investment  saving plan ....................E  None........................................F  Other (specify)....................... G | | | | | | |
|  | | | | | | | |  | | | | | | |
| 01 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 02 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 03 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 04 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 13 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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12.3

Please fill in the Household Roster from Questionnaire MODULE A.

|  |  |  |  |
| --- | --- | --- | --- |
| **HOUSEHOLD ROSTER** | | | |
| I  D | A | B | C  N A M E |
| N  U  M  B  E  R | M  E  M  B  E  R | A  G  E |  |
|  | | | |
| 01 |  |  |  |
| 02 |  |  |  |
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SECTION 12: CREDIT, ASSETS AND SAVINGS

PART B: ASSETS AND DURABLE CONSUMER GOODS

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ITEM | CODE | 1  Does any member of the household own ………………?  Yes, working…1  Yes, not  Working……2  No…………….3  (>> Next Item) | | | 1a  Who owns it?  ID | | | 2  How long ago was …………… obtained?  **LESS THAN ONE YEAR: CODE 00**  ITEM | | | 3  What was its purchase price?  **(IF GIFT PUT ZERO)**  **C = CURRENCY CODE** | | | | | | | 4  How much could you sell it now in Ghana cedis?  I T E M | | |
| Cedi………………….1  Naira…………………2  CFA………………….3  Pound………………..4 | | | US Dollar………….……5  Euro……………………..6  Yen………………………7  Other (specify)…………...8 | | | |
| A | B | C | A | B | C | ITEM - A | C | ITEM - B | | C | ITEM - C | C | A | B | C |
| A | B | C | YEARS | | | A M O U N T | | | | | | | VALUE (GH¢) | | |
| Furniture (stuffed) | 301 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Furniture (not stuffed) | 302 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Sewing machine | 303 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Stove (kerosene) | 304 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Stove (electric) | 305 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Stove (gas) | 306 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Refrigerator | 307 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Freezer | 308 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Air conditioner | 309 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Fan | 310 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Radio | 311 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Radio Cassette | 312 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| CD-player | 313 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| 3-in-one-radio system/home theatre | 314 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Video cassette player | 315 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| VCD/DVD/mp3/mp4 player/ipod | 316 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Desktop computer | 317 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Laptop computer | 318 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Printer | 319 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Computer Accessories | 320 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Camera/digital camera | 321 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Satellite dish | 322 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Washing machine | 323 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Television | 324 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Camera/Video | 325 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |

12.4

SECTION 12: CREDIT, ASSETS AND SAVINGS

PART B: ASSETS AND DURABLE CONSUMER GOODS

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ITEM | CODE | 1  Does any member of the household own ………………?  Yes, working…1  Yes, not  Working……2  No…………….3  (>> Next Item) | | | 1a  Who owns it?  ID | | | 2  How long ago was …………… obtained?  **LESS THAN ONE YEAR: CODE 00**  ITEM | | | 3  What was its purchase price?  **(IF GIFT PUT ZERO)**  **C = CURRENCY CODE** | | | | | | | 4  How much could you sell it now in Ghana cedis?  I T E M | | |
| Cedi………………….1  Naira…………………2  CFA………………….3  Pound………………..4 | | | US Dollar………………..5  Euro……………………..6  Yen………………………7  Other (specify)…………...8 | | | |
| A | B | C | ITEM - A | C | ITEM - B | | C | ITEM - C | C | A | B | C |
| A | B | C | A | B | C | YEARS | | | A M O U N T | | | | | | | VALUE (GH¢) | | |
| Iron (Electric) | 326 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Bicycle | 327 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Motor cycle | 328 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Car | 329 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| House/building | 330 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Land/Plot | 331 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Shares | 332 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Boat | 333 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Outboard motor | 334 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Microwave | 335 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Food Processor/blender | 336 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Hoover/Vacuum Cleaner | 337 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Rice Cooker | 338 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Toaster | 339 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Electric kettle | 340 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Water heater (bathroom) | 341 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Box iron | 342 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Mobile phone | 343 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Tablet PC (e.g .ipad, galaxy tab,etc) | 344 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Generator/plant | 345 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Jewellery | 346 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Clothes (Wax, Kente, etc.) | 347 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Clock/Watch | 348 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Cooking utensils (set) | 349 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Poultry/Livestock | 350 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Tree Crop/Plantation | 351 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |
| Bed-furniture | 352 |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |

12.5

SECTION 12: CREDIT, ASSETS AND SAVINGS

PART C: SAVINGS (INCLUDE SUSU)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1  **CHECK S12AQ4 IF**  **ANY MEMBER OF THE HOUSEHOLD HAS A SAVINGS OR SUSU ACCOUNT**  Yes……………………….1  No………………………..2  **(>> END INTERVIEW)** | 2  I  T  E  M  N  U  M  B  E  R | 3  In whose name is the account?  MEMBER ID | | 4  In what currency is the account? | 5  What is the current balance of these savings? | | 6  How much has been added to the savings in the past 12 months? | | 7  How much has been withdrawn from the savings in the past 12 months? | | |  | | **CURRENCY CODE** | | | |  | |
|  | | Ghana Cedis……………..1  Naira……………………..2  CFA………………………3  Pounds……………………4  US Dollars…………..…...5 | | | |  | |
|  | | Euro………………………6  Yen……………………….7  Other (specify)……………8 | | | |  | |
| CURRENCY CODE | AMOUNT | | AMOUNT | | AMOUNT | | |  | | |  | | | |  | |
|  | |  | | | |  | |
|  | 1 |  | |  |  | |  | |  | | |  | | | |
|  | 2 |  | |  |  | |  | |  | | |  | | | |
|  | 3 |  | |  |  | |  | |  | | |  | | | |
|  | 4 |  | |  |  | |  | |  | | |  | | | |
|  | 5 |  | |  |  | |  | |  | | |  | | | |
|  | 6 |  | |  |  | |  | |  | | |  | | | |
|  | 7 |  | |  |  | |  | |  | | |  | | | |
|  | 8 |  | |  |  | |  | |  | | |  | | | |
|  | 9 |  | |  |  | |  | |  | | |  | | | |
|  | 10 |  | |  |  | |  | |  | | |  | | | |
|  |  |  |  |  |  |  |  |  |  |  |  | |  | | | |

12.6