

GOVERNMENT OF NICARAGUA
NATIONAL INSTITUTE OF STATISTICS AND CENSUS

LIVING STANDARDS MEASUREMENT STUDY SURVEY

E.M.N.V. '98

FISE
WB
UNFPA
UNDP
ASDI
NORAD
NADIDA
IDB

Questionnaire No. /___/___/___/ . /___/___/

Questionnaire _____ of _____

FISE () 1

Beneficiary: YES () 1

Urban

School () 1

Health Post () 3

Water () 5

Sewage () 7

Latrines () 9

Not FISE () 2

No () 2

Rural

() 2

() 4

() 6

() 8

() 10

I. GEOGRAPHIC IDENTIFICATION

LOCALIZATION		CODE	LOCATION	CODE	IDENTIFICATION	NUMBER
1. Department			6. Dwelling Number		11. Number of people in the household	
2. Municipio			7. Number of households		12. Name of household head	
3. Supervision Area			8. Household number			
4. Selected Segment	Compact Segment		NAMES OF FIELD WORK PERSONNEL			CODE
5. Area	Urban...1		9. Interviewer			
	Rural...2		10. Supervisor			

II. ADDRESS OF THE DWELLING WHERE THE SELECTED HOUSEHOLD IS LOCATED

Community/Region/Neighborhood:	Street/Way/Road:	House No./Lot No./Building Name:	Other signs:
--------------------------------	------------------	----------------------------------	--------------

III. KEY ENTRY

Name of Key Entry Operator:	Code	FIRST ROUND		SECOND ROUND	
		Date of key entry		Date of key entry	
		Date of correction		Date of correction	

I ROUND

SECTION 1. CHARACTERISTICS OF THE DWELLING AND HOUSEHOLD			
PART A. CHARACTERISTICS OF THE DWELLING – ONLY FOR THE PRINCIPAL HOUSEHOLD			
<div>1. How many persons usually live in this dwelling?</div> <div>Number of persons: ____/____/</div>	<div>4. What is the most prevalent material used for the exterior wall of the housing?</div> <div>-Bricks or earthenware bricks1</div> <div>-Concrete blocks2</div> <div>-Sun-dried brick3</div> <div>-Stone quarry4</div> <div>-Bamboo, cane or palm5</div> <div>-Wood6</div> <div>-Wood and concrete (miniskirt)7</div> <div>-Nicalit or plycem lamina8</div> <div>-Broken stone or residues9</div> <div>-Other, what?10</div>	<div>6. What is the most prevalent material used for the roof?</div> <div>-Zinc1</div> <div>-Earthward tile2</div> <div>- Nicalit or plycem lamina3</div> <div>-Straw or similar4</div> <div>-Broken stone or residues5</div> <div>-Other, which one?6</div>	OBSERVATIONS
<div>NOTE:</div> <div>A PERSON IS CONSIDERED AS AN HABITUAL RESIDENT IN A SELECTED HOUSEHOLD IF IT SERVES HIM/HER AS A PERMANENT RESIDENCE (EAT AND SLEEP) OR IF HE/SHE LIVES THERE AT LEAST 3 MONTHS DURING THE LAST 12 MONTHS.</div>			
<div>2. How many households or groups of people are there in this house that cook separately?</div> <div>Groups: ____/</div>		<div>7. What is the principal means of access to this dwelling at all time?</div> <div>-Paved street1</div> <div>-Unpaved street2</div> <div>-Trail3</div> <div>-Sea or river4</div> <div>-Other5</div>	
<div>NOTE:</div> <div>HOUSEHOLD IS THE PERSON OR GROUP OF PEOPLE, COULD BE RELATIVES OR NOT, WHO USUALLY LIVE IN THE SAME HOUSE, FILL IT PARTIALLY OR TOTALLY, AND SHARE THEIR FOOD.</div>	<div>5. What is the most prevalent material used for the flooring?</div> <div>-Wood1</div> <div>-Tile2</div> <div>-Bricks or earthenware bricks3</div> <div>-Concrete bricks, mosaic.....4</div> <div>-Soil5</div> <div>-Other,6</div>	<div>8. From 1993, the means of access to this dwelling:</div> <div>-Have improved1</div> <div>-Have deteriorated2</div> <div>-Still the same3</div> <div>-You didn't live there4</div>	
<div>3. Kind of housing (by observation)</div> <div>-House[] 1</div> <div>-Manor[] 2</div> <div>-Apartment or room[] 3</div> <div>-Room in boarding house.....[] 4</div> <div>-Farm or hut[] 5</div> <div>-Improvised housing[] 6</div> <div>-Business or storage used as a house .[] 7</div>		<div>9. How many rooms does this dwelling have? (Not including kitchen, bathrooms, halls, and garage)</div> <div>Number of rooms: ____/____/</div>	

SECTION 1: CHARACTERISTICS OF THE DWELLING AND HOUSEHOLD			
PART B. HOUSEHOLD CHARACTERISTICS AND EXPENDITURES - FOR EVERY HOUSEHOLD -			
10. How many rooms does this household have? (Not include: kitchen, bathrooms, halls, garages, and rooms dedicated to work or business)	17. If you had to rent this dwelling , how much would you have to pay monthly? CORDOBAS: /_/_/_/_/_/_/_/	24. Since 1993, have you gotten the water from the same source? Yes[] 1 > 28 No[] 2 You didn't live here[] 3 > 28	30. Where is the sanitary service? -Inside the housing[] 1 -Outside the housing[] 2
TOTAL _____/_____/_____ 11. Among those rooms mentioned before, how many rooms does the household always use to sleep even if it has other uses during the day? TOTAL _____/_____/_____	18. What is the main source of the household's water? -Pipes inside the dwelling.....[] 1 -Pipes outside of the dwelling, but within the property.....[] 2 -Public station.....[] 3 -Public or private well[] 4 -River, running water or stream .[] 5 -Tanker, cart or barrel[] 6 -From other dwelling.....[] 7 -Other[] 8	25. In 1993, where did this household get the water? -Pipes inside the dwelling.....[] 1 -Pipes outside of the dwelling, but within the property.....[] 2 -Public station.....[] 3 -Public or private well[] 4 -River, running water or stream .[] 5 -Tanker, cart or barrel[] 6 -From other dwelling.....[] 7 -Other[] 8	31. In 1993, did this household have sanitary service? Yes[] 1 No[] 2 > 35 You didn't live here[] 3 > 36
12. How many rooms do you use exclusively for working or business? TOTAL _____/_____/_____ (None: 00)	19. Is the water supply for the exclusive use of the household? Yes.....[] 1 No[] 2 > 21	26. Was the water supply for the exclusive use of the household? Yes[] 1 > 28 No[] 2 > 28	32. What kind of sanitary services did this household have in 1993? Latrine[] 1 Toilet: -Connected to sewage pipe[] 2 -Connected to septic well[] 3 -To flow into a river[] 4
13. Is the dwelling where this household lives: -Own with property title1 -Own without property title2 -Mortgaged3 -Transferred or lent4 -Received for services5 -Lodging6 -Rented7 -Other, what?8	20. What is the distance between the water source and your home, and how long does it take to bring to your home? DISTANCE /_/_/_ Kms. /_/_/_/ Mts. TIME /_/_/ Hr. /_/_/ min.	27. In 1993, what was the distance between the water source and your home, and how long did it take to bring to your home? DISTANCE /_/_/_ Kms. /_/_/_/ Mts. TIME /_/_/ Hr. /_/_/ min	33. Was the sanitary service for the exclusive use of this household in 1993? Yes[] 1 No[] 2
14. How much did the household pay last month or last time for rent? CORDOBAS /_/_/_/_/_/_/_/ ▶18	21. Does this household pay for water consumption? -Yes, with meter1 -Yes, without meter2 -Yes, included in the rent3 - It is a new service4 -Don't pay5	28. What kind of sanitary services does this household have? Latrine[] 1 Toilet: -Connected to sewage pipe[] 2 -Connected to septic well[] 3 -To flow into a river[] 4 Not have[] 5 > 31	34. Where was the sanitary service in 1993? -Inside the housing[] 1 -Outside the housing[] 2
15. Who is/are the owner(s) of this dwelling? NAME . CODE _____/_____/_____ _____/_____/_____ _____/_____/_____ AFTER FILLING IN SECTION 2 TRANSCRIBE THE CODE CORRESPONDING TO THE PERSON. IF HE/SHE DOES NOT BELONG TO HOUSEHOLD, WRITE CODE 50	22. How much did you pay last month or the last time for water consumption? CORDOBA: /_/_/_/_/_/_/_/	29 Is the sanitary service for the exclusive use of this household? Yes[] 1 No[] 2	35. How does this household throw out the most of the garbage? -Garbage truck[] 1 -It is burned[] 2 -It is buried[] 3 -It is made fertilizer[] 4 -It is thrown in the country, river, etc.[] 5 -It is carried to an authorized container ...[] 6
16. If you have to sell the housing that this household occupies, how much would you sell it? CORDOBAS: /_/_/_/_/_/_/_/	23. What is the main processing you do to water in order to drink it? -Nothing.....[] 1 -Boil it[] 2 -Add chlorine[] 3 -Buy bottled water[] 4 -Other[] 5		

SECTION 1: CHARACTERISTICS OF THE DWELLING AND HOUSEHOLD			
continued			
36. Does this household pay for throwing out the garbage? Yes[] 1 No[] 2 > 38	42. Where is the place in this dwelling that the household cooks the food? -In a room dedicated just for cooking[] 1 -In a room used to sleep too[] 2 -In the living-dinner room[] 3 -In the yard, dinner room or other place ...[] 4 -Not cook[] 5>49	46. Who is the owner of the land where you get the firewood to cook? -Self[] 1 -Other individuals[] 2 -Government[] 3 -Other, which one?[] 4 -You don't know[] 5	52. What is the distance between the nearest health center/ first-aid station and your home, and how long does it take to get there? DISTANCE /_/_/ Kms. /_/_/_/ Mts. TIME /_/_/ Hr. /_/_/ min.
37. How much did you pay last month/ last time for throwing out the garbage? CORDOBAS: / / / / / /	43. What kind of fuel do you usually use for cooking? -Firewood[] 1 -Butane or propane gas[] 2 -Kerosene gas[] 3 -Coal[] 4 -Electricity[] 5 -Other[] 6	47. What is the distance between the place where you get the firewood and your home, and how long does it take to bring to your home? DISTANCE /_/_/ Kms. /_/_/_/ Mts. TIME /_/_/ Hr. /_/_/ min.	53. What is the distance between the nearest elementary school and your home, and how long does it take to get there? DISTANCE /_/_/ Kms. /_/_/_/ Mts. TIME /_/_/ Hr. /_/_/ min
38. What is the main kind of lighting that this household has? -Electric power[] 1 -Electric generator[] 2 -Gas, kerosene, oil lamp[] 3 -Other[] 4 -None[] 5 > 42	44. How do you get firewood? -Purchased[] 1 -Received as gift.....[] 2 -You look for it/ pick it up at the country[] 3	48. How much did you pay during the last month for getting fuel to cook? CORDOBAS: /_/_/_/_/_/_/_/ (Nothing = 00)	54. In this household does anyone participate in an organization or community group? <div>Yes No</div> <div>-Neighborhood committee[] 1 [] 2</div> <div>-Municipal Development comm.....[] 1 [] 2</div> <div>-Women Organization[] 1 [] 2</div> <div>-School committee (parents)/ Educational Council.....[] 1 [] 2</div> <div>-Savings and credit cooperative.....[] 1 [] 2</div> <div>-Sports Club[] 1 [] 2</div> <div>-Professional Association[] 1 [] 2</div> <div>-Religious Organization[] 1 [] 2</div> <div>Other, what?.....[] 1 [] 2</div>
39. Does this household pay for electric power consumption? -Yes, with meter1 -Yes, without meterr2 -Yes, included in the rent3 - It is a new service4 -Not pay5	45. In what unit of measure do you acquire the firewood used for cooking? -Bundle[] 1 -Cut[] 2 -Cartload[] 3 -Load[] 4 -Freight[] 5 -Other, what?[] 6	49. Does this household pay for telephone service? -Yes,1 -Yes, included in the rent2 -Not pay3 -You don't have telephone4	
40. How much do you pay for electric power consumption? CORDOBAS: /_/_/_/_/_/_/_/	Go to question 47	50. How much did you pay the last month/ last time for telephone service? CORDOBAS: /_/_/_/_/_/_/_/ (Nothing = 00)	
41. How much did you pay last month or the last time for fuel, gas, kerosene, etc. to light the housing? CORDOBAS: /_/_/_/_/_/_/_/ (None = 00)		51. During the last 12 months, did you make improvements to the dwelling? Yes[] 1 No[] 2	

SECTION 1: CHARACTERISTICS OF THE DWELLING AND HOUSEHOLD									
Continuation ...									
55. Since 1993, is this household beneficiary from some program like? Yes1 No2 <div><div></div><div>Go to the next section</div></div>		56. What organization is the main donor? FISE1 Government/not FISE2 NGO/International donors ...3 Private enterprises4 Religious congregations5 Church6 Community7 Other, what?8 You don't know9		57. The contribution of this household was/were: (MULTIPLE ANSWERS) Proposal/design of the project1 Materials2 Labor force3 Financing4 Land5 Other, what?6 Nothing7		58. In your opinion, has the project/ program improved this household's standard of living? Much1 Something2 Little3 Nothing4		OBSERVATIONS	
Code		ORGANIZATION							
1. Construction and/or improvement of school.									
2. Construction and/or improvement of health centers									
3. Installation of drinking water									
4. Construction of latrines									
5. Installation of electricity									
6. Construction of sewers									
7. Construction of roads/streets									
8. Direct donation of food									
9. Health campaign									
10. Literacy campaign									
11. Productive activities									
12. Sports activities									
13. Legal assistance									
14. Employment program									
15. Other									

<div>SECTION 2. HOUSEHOLD'S CHARACTERISTICS AND COMPOSITION</div> <div>SECTION 2. PART A. BEGINNING THE SECTION</div> <div>INFORMANT: THE PREFERRED INFORMANT SHOULD BE THE HOUSEHOLD HEAD. IF HE/SHE ISN'T THERE, ASK FOR "MAIN INFORMANT" TO ANSWER INSTEAD OF THE HOUSEHOLD HEAD. THIS PERSON HAS TO BE A HOUSEHOLD MEMBER ABLE TO GIVE US INFORMATION ABOUT EVERY OTHER MEMBER OF THE HOUSEHOLD.</div> <div>SURVEYOR: INTERVIEWED: _____ IDENTIFICATION CODE: _____</div> <div>1-3. I would like to make a complete list of everybody who usually lives here and shares the food in this household.</div> <div>I need the names of the every member of your immediate family. In other words, the names of household head, his wife (her husband), their single children that usually live and share the meals in this household. I need to sort them in chronological order. After that, I need the name of their married children, followed by their respective spouses and children.</div> <div>ALWAYS WRITE DOWN THE HOUSEHOLD HEAD FIRST, FOLLOWED BY HIS WIFE OR DOMESTIC PARTNER. AFTER THAT WRITE DOWN THEIR SINGLE CHILDREN IN CHRONOLOGICAL ORDER, AND FINALLY THEIR MARRIED CHILDREN WITH THEIR RESPECTIVE SPOUSES AND CHILDREN.</div> <div>WRITE DOWN THE NAME, THE RELATIONSHIP WITH THE HOUSEHOLD HEAD, AND THE GENDER OF EACH PERSON.</div> <div>Now tell me the names of other relatives of the household's head or his/her spouse. In other words, habitual members of the family who live and share the meals in this household.</div> <div>WRITE DOWN THE NAME, THE RELATIONSHIP WITH THE HOUSEHOLD HEAD, AND THE GENDER OF EACH PERSON.</div> <div>Is there any other person who isn't here now, but usually lives and shares meals in the household? For example, somebody who is studying in another place, on vacation, or visiting other place.</div> <div>WRITE DOWN THE NAME, THE RELATIONSHIP WITH THE HOUSEHOLD HEAD, AND THE GENDER OF EACH PERSON</div>	<div>Is there any person who slept here last night even if he/she doesn't used to live here?</div> <div>WRITE DOWN THE NAME, THE RELATIONSHIP TO THE HOUSEHOLD HEAD, AND THE GENDER OF EACH PERSON.</div> <div>FOR EACH PERSON WRITTEN DOWN IN COLUMN 1, ASK QUESTIONS 4 TO 13, AND CLASSIFY HIM/HER IN COLUMN A. COMPLETE EACH LINE BEFORE GOING TO NEXT PERSON.</div> <div>4 - 13. Now, I am going to ask you some information about each person you have mentioned.</div> <div>COLUMN A Left cell of the question 1 (flag)</div> <div>CLASSIFY EACH PERSON ACCORDING TO THE FOLLOWING CRITERIA</div> <div>SEE THE ANSWER TO QUESTION 13</div> <div>MEMBERS OF HOUSEHOLD ARE PEOPLE WHO HAVE AN ANSWER OF 0 TO 9 MONTHS OF ABSENCE, EXCEPT:</div> <div>-DOMESTIC WORKERS AND THEIR CHILDREN OR RELATIVES (SEE QUESTION 2) -THE LODGERS AND THEIR CHILDREN OR RELATIVES. (SEE QUESTION 2) -DEAD PEOPLE</div> <div>NOT MEMBERS OF THE HOUSEHOLD ARE PEOPLE WHO ANSWERED MORE THAN 9 MONTHS OF ABSENCE, EXCEPT:</div> <div>-THE HOUSEHOLD HEAD -CHILDREN UNDER 3 MONTHS OLD</div> <div>COLUMN A: IN THIS COLUMN WRITE DOWN THE CODE THAT INDICATES IF THE PERSON IS A MEMBER OF THE HOUSEHOLD OR NOT, ACCORDING TO CRITERIA MENTIONED BEFORE.</div> <div>COLUMN B: ON THE LEFT SIDE IN QUESTION 1, COLUMN B WRITE DOWN THE AGE IN YEARS, (SEE QUESTION 4). AMONG THE PEOPLE CLASSIFIED AS MEMBER OF THE HOUSEHOLD (CODE 1 IN COLUMN A), IF HE/SHE IS NOT A MEMBER LEAVE BLANK THE CELL.</div>
---	--

SECTION 3. HEALTH. PART B. VACCINATION AND PRESENCE OF DIARRHHEA – FOR CHILDREN LESS THAN 6 YEARS OLD

Has he/she been vaccinated against Tuberculosis BCG? (It leaves a scar)		Has he/she been vaccinated against Diphtheria, Pertusis and Tetanus (DPT)? (Triple)			Has he/she been vaccinated against Polio (ATP)?			Has he/she been vaccinated against Measles?			WRITE THE SOURCE OF INFORMATION OF THE QUESTIONS 6, 7, 8 AND 9		Did he/she have diarrhea last month?		Did you consult a doctor for the diarrhea of ... last month?		Did you take medical advice from:.....?	
Yes1 No2		Yes1 No2 If 1: How many doses?			Yes1 No2 If 1: How many doses?			REMEMBER: THIS VACCINE IS FOR PEOPLE OVER 6 MONTHS Yes1 No2 If 1: How many doses?			Card1 Mother or relative ..2 Both3		Yes1 No2 If 1: What kind of medicine did you give him/her? Home remedy1 Oral rehydration salts2 Medicine3 Other, what?4 Nothing5		Yes1 No2 If 2: go to question 14 If 1: How many times?		Doctor1 Nurse2 Nurse assistant3 Pharmacist.....4 Midwife.....5 Traditional healer.....6 Community health worker.....7 Other , what?.....8 Go to question 15	
		Code	Doses	Booster	Code	Doses	Booster	Code	Doses	Booster			Code	Medicine	Code	Number of Times		
CP	6	7			8			9			10		11		12		13	
01																		
02																		
03																		
04																		
05																		
06																		
07																		
08																		
09																		
10																		
11																		
12																		

SECTION 3. HEALTH . PART B: VACCINATION AND PRESENCE OF DIARAHHEA - FOR CHILDREN UNDER 6 YEARS OLD							
ACCESS TO SERVICES AND HEALTH EXPENSES							
Why did you not consult a doctor or self medicate last month? Slight disease1 You did not have time2 Health Care Center is too far away..3 Bad care4 Expensive care5 Long wait6 Shortage of adequate personnel7 There is no medicine8 Inaccessible schedule9 Inadequate infrastructure/ instruments10 Budget problems11 Other reason, what?12 Go to question 21		Where did you go last time that you required medical care? Health Post1 Health Center2 Hospital (MINSA)3 Polyclinic INSS4 Private Hospital5 Work place6 Pharmacy7 Private Clinic8 Community health worker9 Traditional healer's house10 Other, what?11 Patient's house12 If 1 or 2: go to question 16 If 3 to 11: go to question 18 If 12: go to question 21		What is the first-aid station or health center's name where you went?		What is the first-aid station or health center's address where you went? MUNICIPALITY, REGION OR NEIGHBORHOOD	
CP	14	15	16	17			CP
01							01
02							02
03							03
04							04
05							05
06							06
07							07
08							08
09							09
10							10
11							11
12							12

SECTION 3. PART C DISEASES AFFECTION AND CONTROL -FOR EVERYBODY-											
DISEASES AFFECTION AND ACCESS TO SERVICES											
Did you have any disease like: cough, cold, or any respiratory problem .1 Measles or another eruptive disease.....2 Accident.....3 Diarrhea for people over 6 years old4 Another disease or several of that mentioned before5 Were you healthy6 last month? If 6: go to question 41 EXCLUDE PREGNANCY		Did you take medical advice for that disease last month? Yes1 No2 If 2: go to question 26 If 1: How many times?		Did you take medical advice from:.....? Doctor1 Nurse2 Nurse assistant3 Pharmaceutical4 Midwife.....5 Quack doctor6 Health communitary job (health campaign)7 Other8 Go to question 27		Why did you not consult a doctor last month? Slight disease1 You did have not time ..2 Health Care Center is too far3 Bad care of4 Expensive care of5 Long wait6 Shortage of adequate personnel7 There is not medicine ...8 Inaccessible schedule ...9 Inappropriate infrastructure/ instruments10 Budget problems11 You already had the medicine.....12 You know the disease 13 Other reason, which one? ...14 Go to question 34		Where did you go last time that you required medical care? First-aid station1 Health Center2 Hospital (MINSA)3 Polyclinic INSS4 Private Hospital5 Work place6 Pharmacy7 Private Clinic8 Health communitary worker (campaign) ...9 Quack doctor's house10 Other, which one? ..11 Patient's house12 If 1 or 2: go to question 28 If 3 to 11: go to question 30 If 12: go to question 32		What is the first-aid station or health center's name where you went?	
		Cod	Times								
CP	23		24	25	26	27	28	CP			
01								01			
02								02			
03								03			
04								04			
05								05			
06								06			
07								07			
08								08			
09								09			
10								10			
11								11			
12								12			

SECTION 4. EDUCATION PART A: PRESCHOOL ATTENDANCE AND CDI -FOR CHILDREN UNDER 6 YEARS OLD							
ATTENDANCE		KIND OF CENTER	MONTHLY EXPENSES	ANNUAL EXPENSES			
Did you attend or are you attending ...this school year to: Preschool1 CDI2 School3 Doesn't attend/enroll4 If 1 or 2 go to ques. 3 If 3: go to question 6		Why did you not attend or no were enroll in Preschool or CDI? There is not1 It is far from the house2 You do not need it3 Not old enough.....4 Lack money5 Illness6 Other, which one?7 Next person	Is the preschool, or CDI, where you attend or attended: Public1 Private2 Day Care at Work.....3 Communitary (rural)4 Other, which one? ____5	How much did you pay for grants, snacks and/or meals in the CDI or preschool last month? If he/ she did not pay: write (00)	How much did you pay in the current school year for registration in the CDI or for pre enroll and enrollment of ... ? If he/ she did not pay: write (00)	How much did you pay in the current year for: uniforms, books, educate articles, contribution of family association of ... in the CDI or preschool? If he/ she did not pay: write (00)	
			CORDOBAS	CORDOBAS	CORDOBAS		
CP	1	2	3	4	5	5 A	CP
01							01
02							02
03							03
04							04
05							05
06							06
07							07
08							08
09							09
10							10
11							11
12							12

SECTION 4. EDUCATION PART A: PRESCHOOL ATTENDANCE AND CDI -FOR CHILDREN UNDER 6 YEARS OLD									
LITERACY			EDUCATIONAL LEVEL		CURRENT ENROLLMENT				
Do you know: Read and write1 Only read2 Neither read and write3 If 3: go to question 8		Where did you learn to read? School1 Family teaching.....2 C.N.A..... .3 Popular educational CEP4 Private teacher5 Other, which one? ___6	What is the level of studies and the last degree that you approved? None0 Preschool1 Adult education2 Elementary3 High school 4 Technical at the basic level5 Technical at the intermediate level6 Technical at the upper level7 University8 If 0: go to question 10	What is the highest certificate (diploma) that you have gotten? None0 Preschool1 Adult education2 Elementary3 High school4 Technical at the basic level5 Technical at the intermediate level6 Technical at the upper level7 University8	Did you enroll in the current school year in: preschool, adult education, elementary, high school, university, graduate programs? Yes1 No2: If 1: go to question 12 If 2: If he/ she is less than or equal to 40 years old, go to question 11 or If he/ she is older than 40 year-old, go to section 5	Why do you not attend to school in the current school year? Age1 Economic problems2 Rural activities3 Domestic duties4 Finished studies5 It does not mind you6 There is not nearby school ..7 Illness8 There is not availability (closed enrollment)9 Degree not offered.....10 Insufficient teachers11 Insufficient security in the school12 Insufficient textbooks13 Handicap14 Other, which one?15 Go to section 5	What is the educational level in which you enrolled current school year? Preschool1 Adult education2 Elementary3 High school 4 Technical basic level5 Technical intermediate level .6 Technical upper level7 University8 If 1 or 2: go to question 20 If 3: go to question 13 If 4 to 8: go to question 20		
			Level	Approved degree				Level	Degree or year
CP	6	7	8		9	10	11	12	CP
01									01
02									02
03									03
04									04
05									05
06									06
07									07
08									08
09									09
10									10
11									11
12									12

[illegible]

SECTION 5. ECONOMIC ACTIVITY -PART A- ACTIVITIES OF THE PEOPLE OF 6 OR MORE YEARS OLD								
LABOR ACTIVITIES				LOOKING FOR WORK AND INACTIVITY				
REGISTER THE CODE OF PERSON WHO GIVES THE INFORMATION		Did you work during the last week?	Did you work at least	Although you didn't work last week, were you away from your job for illness, strike, permission, vacations or other reasons?	Did you look for a remunerated job or did you try to establish a business during the last week	What was the main reason for that you didn't look for a job?	What was the main activity to find a job last week?	
		Yes1 No2 If 1: go to question 12	-an hour? -helping in a family business? -like a learner without remuneration? -selling any product? -helping in a family farm? Yes1 No2 If 1: go to question 12	Yes1 No2 If 1: go to question 12	Yes1 No2 If 1: go to question 6	You are waiting job reply1 You are waiting to begin a new job .2 You are waiting for a job season.....3 Have sporadic/ occasional job4 No one to take care ofchildren5 You are studying/ under age6 You are pensioned7 You are a person of independent means8 Housewife (housekeeper)9 Permanent handicap for working...10 You are elderly man/ lady11 You are tired to look for a job12 You think there are not jobs or you will not get one13 Illness14 Others, which one?15 Go to question 8	You visited a manager1 You went to Ministry of Labor .2 You went to private employment agency3 You visited a friend or relative..4 You looked up newspapers5 You looked for loans or financing facilities6 You tried to establish a business ...7 You bought, rented or took lands for working8 You asked for job to a relative 9 Other, which one?10	
CP	CP	1	2	3	4	5	6	CP
01								01
02								02
03								03
04								04
05								05
06								06
07								07
08								08
09								09
10								10
11								11
12								12

SECTION 5. ECONOMIC ACTIVITY -PART A- ACTIVITIES OF THE PEOPLE OF 6 OR MORE YEARS OLD (Continuation)						
LOOKING FOR WORK AND INACTIVITY						
How many consecutive weeks have you been looking for a job? Consecutive means without lose time. If the person says: less than one week, write 00	Have you worked any time before? Yes1 No2 If 2: go to next section	Why did you leave your last job? -The enterprise was liquidated1 -You were dismissed2 -Retirement plan3 -By age4 -End of the contract5 -Agricultural cycle/ seasonal work ended6 -You are pensioned off7 -You earned not much money8 -You didn't like your job9 -Not much work10 -Family/ home duties11 -Studies12 -Insufficient industrial safety13 -Improper treatment or psychological pressures 14 -Illness15 -Other, which one?16	How long are you without working? Time unit (U/T) Days1 Weeks2 Months3 Years4	Did you work in a remunerated job, for yourself, or helped relatives or other people during the last 12 months? Yes1 No2 If 1: go to the question 48 If 2: go to next section		
Weeks				Quantity	U/T	
CP	7	8	9	10		11
01						01
02						02
03						03
04						04
05						05
06						06
07						07
08						08
09						09
10						10
11						11
12						12

SECTION 5. ECONOMIC ACTIVITY -PART C- SECOND JOB OF THE LAST WEEK FOR PEOPLE OF 6 OR MORE YEARS OLD (Continuation)										
WORK TIME		INCOMES		WORK STATUS		OTHER INCOMES				
How many days did you work like ... (read answer 32) ... last week or the last week that you worked?		How many hours did you work like ... (read answer 32) ... last week or the last week that you worked?		How much did you receive as a net salary like ... (read answer 32) ...; every how often do you receive it? FREQUENCY Daily1 Weekly2 Every 14 days3 Every fortnight4 Monthly5 Quarterly6 Half yearly7 Yearly8 Other, which one?....9 IF YOU DON'T RECEIVE MONETARY PAYMENT, WRITE 00		In your profession ... (read answer 32) ...; you worked like: -Employee/ worker.....1 -Day laborer/unskilled2 -For oneself3 -Patron or employer4 -Cooperative production member5 -Non remunerated worker .6 -Other, which one?7 If 2: go to question 42 If 3 to 6: go to question 43		For your profession like ... (read answer 32) ... did you receive commissions, overtime, tips? Yes1 No2 If 1: How much did you receive during the last month?		
Days		Hours		CORDOBAS		Fre	Cod	CORDOBAS		
CP	36	37		38			39	40		
01								CP		
01								01		
02								02		
03								03		
04								04		
05								05		
06								06		
07								07		
08								08		
09								09		
10								10		
11								11		
12								12		

SECTION 5. ECONOMIC ACTIVITY -PART C- SECOND JOB OF THE LAST WEEK FOR PEOPLE OF 6 OR MORE YEARS OLD (Continuation)											
OTHER INCOMES				WORK HOURS		REASON FOR A WORKING DAY LESS THAN 40 HOURS		ADD HOURS			
<div>For your profession like ... (read answer 32) ... did or will you receive allowance (13th month)? Yes1 No2 If 1: How much did or will you receive during the year?</div>				<div>Besides the salary did you receive during the last month: food, housing, uniform transportation or any other good as a part of your salary? Yes1 No2 If 1: If you had to pay for all of these goods that you receive during the last 12 months, how much would you pay for them?</div>		<div>During the last week or the last week you worked, how many hours did you totalize in the tasks that you had? LESS THAN 40 HOURS: Go to question 44 40 HOURS OR MORE: Go to question 46</div>		<div>Why is the main reason for that you worked less than 40 hours last week? -It is your regular schedule1 -The working day was reduced because the lower production or sale2 -Due to lack of financing or credit3 -Family or personal reasons, illness or accidents4 -There is not job any more5 -Other, which one?6</div>		<div>Considering every hour that you worked during the last week, do you want to work more hours to get an additional income? Yes1 No2</div>	
Cod		CORDOBAS		Cod	CORDOBAS		Hours				
CP		41			42		43		44		
01									45		
02											
03											
04											
05											
06											
07											
08											
09											
10											
11											
12											

SECTION 5. -PART D- JOB DURING THE LAST 12 MONTHS - FOR PEOPLE OF 6 OR MORE YEARS OLD (Continuation)														
WORK TIME		SIZE OF THE ESTABLISHMENT		INCOMES			WORK STATUS		OTHER INCOMES					
How many hours did you work weekly like... (read answer 48) ... (generally)?		How many people do work at the institution where you worked last week like ... (read answer 48) ...? (Include yourself) 1 You work alone1 2 to 52 6 to 103 11 to 304 31 to 505 51 to 100.....6 101 and more7		How much did you receive as a net salary like ... (read answer 48) ...; every how often do you receive it? FREQUENCY Daily1 Weekly2 Every 14 days3 Every fortnight4 Monthly5 Quarterly6 Half yearly7 Yearly8 Other, which one? .9 IF YOU DON'T RECEIVE MONETARY PAYMENT, WRITE 00			In your profession ... (read answer 48) ...; you worked like: -Employee/ worker1 -Day laborer/ unskilled laborer2 -For oneself3 -Patron or employer ..4 -Cooperative production member....5 -Non remunerated worker6 -Other, which one? ..7 If 2: go t o question 58 If 3 to 6: go to question 59		For your profession like ... (read answer 48) ... did you receive commissions, overtime, tips? Yes1 No2 If 1: How much did you receive (average) during the last month, and what was that month?			For your profession like ... (read answer 48) ... did you receive allowance (13th month)? Yes1 No2 If 1: How much did you receive during the year, and in what month?		
Hours				CORDOBA S	Mont h	Fr e		Cod	CORDOBA S	Mont h	Cod	CORDOBA S	Month	
CP	52	53		54			55	56			57			CP
01														01
02														02
03														03
04														04
05														05
06														06
07														07
08														08
09														09
10														10
11														11
12														12

SECTION 6. FERTILITY AND WOMEN HEALTH - FOR WOMEN BETWEEN 15 AND 49 YEARS OLD										
BORN ALIVE AND CURRENT PREGNANCY			PRE-NATAL CHECKS							
Have you had sons and daughters born alive? Yes1 No2 If 1: How many?		Are you pregnant now? or have you had alive children during the last 5 years? (since 1993) Yes, you are pregnant1 Yes, you have had children during the last 5 years2 No3 If 3: go to next section	How many months of pregnancy did you have when was your first check? RELATED TO THE LAST OR CURRENT PREGNANCY You still haven't checked10 You didn't check11 If 10 or 11: go to question 9	How many times did you check your last/current pregnancy?	Who did check your last/ current pregnancy? Gynecologist/ doctor1 Midwife2 Nurse or auxiliary3 Other, which one?4	Where did you do the checks of the last/ current pregnancy? First-aid station.....1 Health Center2 Hospital (MINSA).....3 Polyclinic INSS4 Private Hospital5 Work place6 Private Clinic7 Midwife's house8 Patient's house9 NGO Clinic10 Other, which one?11			What is the name of the first-aid station or health center where you went?	
Cod	Number	Code	Months of pregnancy	Times						
CP	1	2	3	4	5	6			7	CP
01										01
02										02
03										03
04										04
05										05
06										06
07										07
08										08
09										09
10										10
11										11
12										12

SECTION 7. TIME USES: HOUSEHOLD MEMBERS OF 6 OR MORE YEARS OLD

THE SURVEYOR SAYS: Now I am going to ask you the activities that you did yesterday and the time you expended doing them.
(SURVEYOR: FOR THE ACTIVITIES THAT ARE DONE OUT OF HOME, YOU HAVE TO INCLUDE THE TIME USED IN TRANSPORTATION)

[illegible]

