

CENTRAL STATISTICAL AGENCY

2015/16 ETHIOPIAN SOCIOECONOMIC SURVEY

STRICTLY CONFIDENTIAL



Form ERSS-H (15/16)

Household Questionnaire

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Regior	1	Zone			Woreda		or rural e 8)	Subcity	/ (For rur 88)	al code	Kebele/FA			EA	
С	Code	Cod	de	-	Code		Code		Co	ode	Cod	e		Co	ode
	8		9		10		11					12			
Household ID Household Size		ize			Ho	usehold F	lead Nam	ne	Village	name whe	re the H	H lives	;		

STAFF DETAILS	Name	Signature	Date		
01741 52174120		O.ga.a.o	DD	MM	YY
26. Enumerator					
27. Supervisor					
28. Coordinator/Statistician					
29. Data Editor 1					
30. Data Editor 2 (Verifier)					
31. Data Entry clerk					
32. Data Entry Verifier					

MARK BOX WITH AN 'X' AND NUMBER QUESTIONNAIRES BELOW IF YOU USE MORE THAN ONE QUESTIONNAIRE TO COLLECT INFORMATION FROM THIS HOUSEHOLD. IF SO, BE SURE TO MARK IN THE SAME WAY THE OTHER QUESTIONNAIRE USED FOR THIS HOUSEHOLD.

QUESTIONNAIRE ___ OF ___ TOTAL -

FIRST INTERVIEW																				
13. DATE OF FIRST INTERV	VIEW:				/ /		7	[DATE / I	MONTH / Y	EAR]										
14. TIME FIRST INTERVIEW	W STARTED				:															
15 TIME FIRST INTERVIEW	V ENDED				:															
16. SECTIONS MISSING/IN	NCOMPLETE AFTER	1ST INTERVIE	W	Cover	Sec 1	Sec 2	Sec 3	Sec 4	Sec 5A	Sec 5B	Sec 6	Sec 7	Sec 8	Sec 9	Sec 10	Sec 11	Sec 12	Sec 13	Sec 14	Sec 15
•																				
SECOND INTERVIE	W						_													
17. DATE OF SECOND INT	ERVIEW VISIT:				/ /			[DATE / I	MONTH / Y	EAR]										
18. TIME SECOND INTERV	/IEW STARTED				:															
19. TIME SECOND INTERV	/IEW ENDED				:															
20 SECTIONS MISSING/IN	ICOMPLETE AFTER 2	ND INTERVIE	W	Cover	Sec 1	Sec 2	Sec 3	Sec 4	Sec 5A	Sec 5B	Sec 6	Sec 7	Sec 8	Sec 9	Sec 10	Sec 11	Sec 12	Sec 13	Sec 14	Sec 15
THIRD INTERVIEW																				
21. DATE OFTHIRD INTERV	VIEW VISIT:				/ /		7	[DATE / I	MONTH / Y	EAR]										
22. TIME THIRD INTERVIE	W STARTED				:				•	-										
23. TIME THIRD INTERVIE	W ENDED				:															
24. SECTIONS MISSING/IN	NCOMPLETE AFTER	SBD INTERVI	E\A/	Cover	Sec 1	Sec 2	Sec 3	Sec 4	Sec 5A	Sec 5B	Sec 6	Sec 7	Sec 8	Sec 9	Sec 10	Sec 11	Sec 12	Sec 13	Sec 14	Sec 15
24. 320110103 101331100/110	NCONFEETE AFTER	JILD HVILIVII	LVV																	
25. GPS COORDINATE		ATITUDE (N)	T]					LONGITUI	DE (E)					1		
			-				_1							1				<u></u>		
			Al	FTER CO	MPLETING	G EACH V	ISIT, PLE	ASE MAKE	OBSERVA [®]	TIONS ON	THE INTE	RVIEW							1	
RECORD GENER	RAL NOTES AI	BOUT TH	E INTEF					PECIAL			TAHT '	WILL BI	E HELP	FUL F	OR SU	PERVI	SORS	AND		
			THIS SECT	ION TO	BE COM	PLETED	BY SUPE	RVISOR												
		1			1															
33. STATUS OF QUES	STIONNAIRE	FI	ELD ONL	Y	DAT	A ENTR	Y ONLY		Respons			1	Refused			4				
			Co	de		(Code			o Complete		2	Moved A		ocated	5 6				
										me		3				7				
<u></u>		<u> </u>		I	_1			<u> </u>												
34. BRANCH NAME &	CODE		1	Ados	nn _1 ^4	die Abel	oo_2 ^~	nbo - 2 ^*	haminah	_ 4 ^00	ito - 5 A	2000 6	Robindo	or _7 ^	sobo Tof	ori - O F	Johrob	irhan	a Doss	io _10
	NAME	CODE	1					ıbo = 3 Ar oba =13												
			1	2.1.00	~··· ~ - 1 1	Jan 100	– 12 G		eferi =21								a – I	JO.	<u>- 2</u> 0	·····

SECTION 1: HOUSEHOLD ROSTER

	SECTION 1: HOUSEHOLD ROSTER											
	4c.	4d.	4e.	4f.	4g.			4h.	5.	6.	7.	8.
	Is [NAME] still	Is the sex	What is the	CHECK IF THE	What is [NA	ME]'s day, r	nonth, and		For how many	IS	What is [NAME]'s main	What is [NAME]'s marital status?
ı	a member of	recorded on	correct sex of	AGE	year of birt	h?		[NAME]'s	months during	RESPONDENT	religion?	
N	this	flap F	[NAME]?	RECORDED				correct age?	the last 12	10 YEARS AND		
	household?	accurate?		ON THE					months was	OLDER?		
D				PRINTOUT IS		CODES FOR N	MONTHS		[NAME] away			
ı				THE SAME AS		SEPTEMBER			from the			
٧				THE ANSWER		OCTOBER NOVEMBER			household?			
1				GIVEN FOR		DECEMBER	4		nousenoia.			
D				Q4.		JANUARY FEBRUARY					ORTHODOX1	NEVER MARRIED1 (►Q11)
υ				ζ.,.		MARCH					CATHOLIC2 PROTESTANT3	MARRIED (MONOGAMOUS)2 MARRIED (POLYGAMOUS)3
A						APRIL					MUSLEM4	DIVORCED
						MAY JUNE1					TRADITIONAL5	SEPERATED
L						JULY1	.1				PAGAN6 WAKIFATA7	WIDOWED6 (▶ Q11)
						AUGUST1 PAGUME1					OTHER (Specify).8	
ı						I MOOPILE	.5			YES1 NO2		
D		YES1								(►Q11)		
	YES1 NO2	(▶Q4f)	MALE1	SAME1								
	(►Q22)	NO2	I British 2	(▶Q5)								
				NO,								
				DIFFERENT2								
									NUMBER OF			
					DAY	MONTH	YEAR		MONTHS			
										ı		
1												
2												
3												
4												
5												
6												
7												
8												
٥												
9												
10												
11												
12												
12												

9.	10.	11.	12.	13.	14.	15.
Does [NAME]'s	WRITE ID CODE OF	In what region were you	Does [NAME]'s	RECORD ROSTER		What is/was
spouse/partner live		born?	biological father	ID OF [NAME]'S	biological	[NAME]'s
in this household		DOTT:	live in this	BIOLOGICAL	father alive?	-
	(OR FIRST WIFE)				lattier aliver	biological father's
now?	WHO LIVES IN THE	TIGRAY	household?	FATHER.		highest
	HOUSEHOLD.	AMHARA3				educational level
ASK ABOUT FIRST		OROMIA4				completed?
WIFE FOR		SOMALIE5 BENSHAGUL GUMUZ6				
RESPONDENT		SNNP7				(USE ATTACHED
WITH MULTIPLE		GAMBELLA12				EDUCATION
WIVES		HARARI				CODES)
		DIREDAWA15				
		OUTSIDE OF ETHIOPIA (SPECIFY)16				
		(SPECIFI)				
YES1			YES1		YES1	1
NO2	CODY CDOLICE ID		NO2		NO2	
(►Q11)	COPY SPOUSE ID		(►Q14)	COPY ID FROM		
	FROM ROSTER			ROSTER (► Q15)		
				, , ,		LEVEL
						LLVLL
-						

16.	17.	18.	19.	20.	21.
	RECORD ROSTER		What is/was	What is/was [NAME]'s biological father's main	What is/was [NAME]'s biological
			-		_
biological	ID OF [NAME]'S	biological	[NAME]'s	industry of occupation?	mother's main industry of
	BIOLOGICAL	mother alive?	biological		occupation?
this	MOTHER.		mother's	AGRICULTURE1	
household?			highest	MINING2	AGRICULTURE1
			educational	MANUFACTURING3 PROFESSIONAL/SCIENTIFIC/	MINING2
			level	TECHNICAL ACTIVITIES4	MANUFACTURING3 PROFESSIONAL/SCIENTIFIC/
			completed?	ELECTRICITY	TECHNICAL ACTIVITIES4
			(1.10=	TRANSPORTATION7	ELECTRICITY5 CONSTRUCTION6
			(USE	BUYING AND SELLING8 FINANCIAL SERVICES9	TRANSPORTATION7
			ATTACHED	PERSONAL SERVICES10	BUYING AND SELLING8 FINANCIAL SERVICES9
			EDUCATION	EDUCATION11 HEALTH12	PERSONAL SERVICES10
			CODES)	PUBLIC ADMINISTRATION13	EDUCATION11 HEALTH12
				OTHER (SPECIFY)14 HOUSEHOLD CHORES15	PUBLIC ADMINISTRATION13
				HOUSEWIFE)16	OTHER (SPECIFY)14 HOUSEHOLD CHORES15
				UNEMPLOYED)17	HOUSEWIFE)16
YES1		YES1		DON'T KNOW18	UNEMPLOYED)17
NO2		NO2			DON'T KNOW18
(►Q18)	COPY ID FROM				
	ROSTER (►Q19)				► NEXT PERSON
			LEVEL		, NEX. 1 E110011
			LLVLL		
		ı			
	<u> </u>				

22.	23.		24.	25.	26.	27.	28.	29.
Why did [NAME] leave this household?	In which month an	d year did	Does [NAME] reside	Which region does [NAME]	Does [NAME]	What type of urban	What country does	How many
,	[NAME] leave this	•	in Ethiopia or outside	reside in at present?	currently reside	location does [NAME]	[NAME] reside in at	months has
			Ethiopia now?		in an urban or in	currently reside in?	present?	[NAME] been
DIVORCE/SEPARATION1 LEFT FOR STUDIES/ EDUCATIONAL OPPORTUNITY2 LEFT FOR WORK	CODES FOR MONTHS		ETHIOPIA1 OUTSIDE ETHIOPIA2	TIGRAY	a rural location?	WOREDA TOWN1 ZONAL TOWN2 REGIONAL TOWN3 OTHER URBAN4	DJIBOUTI 1 1 SOMALIA 2 2 SUDAN 3 SOUTH SUDAN 4 ERITREA 5 KENYA 6 LEBANON (BEIRUT, ETC.) 7 UAE (DUBAI, ETC.) 8 YEMEN 9 SAUDI ARABIA 10 BAHRAIN 11 KUWAITI 12 EGYPT 13 OTHER ARAB COUNTRIES 14 OTHER AFRICAN COUNTRY 15 AMERICA (U.S.) 16 CANADA 17 ENGLAND	away?
	MONTH	YEAR			(▶Q29) URBAN2	► (Q29)	ENGLAND (LONDON, ETC.)18 OTHER EUROPEAN COUNTRY19 OTHER COUNTRY (SPECIFY)20	NO. OF MONTHS

-	31.	32.		33.	34.	35.	36.	37.
DELETED		What is [NAME's] occupation?	'hat is [NAME's] occupation? Wha of th work busin		Who provided information on where to go and/or how to find work during [NAME's] move?	From whom did [NAME] mainly obtain money in order to migrate for this move? (MAIN SOURCE)		Who helped [NAME]?
	YES1 NO2 DON'T KNOW3 (►Q34)	MIN MAN PRC TEC ELF COO TRR BUJ FIN PEE EDD HER PUUE		AGRICULTURE	FAMILY. 1 FRIENDS. 2 NEIGHBORS. 3 RADIO OR TV. 4 INTERNET. 5 AGENT/BROKERS. 6 EMPLOYERS. 7 GOVERMENT. 8 SELF. 9 OTHER	FAMILY. 1 FRIENDS 2 NEIGHBORS 3 EMPLOYERS 4 GOVERMENT 5 SELF 6 OTHER (SPECIFY) 7	YES1 NO2 DON'T KNOW3 NEXT PERSON	FRIENDS 2 ACQUAINTANCES 3 STRANGERS 4 NGOS 5 RELIGIOUS ORGANIZATION 6 GOVERNMENT ORGANIZATION 7 OTHER (SPECIFY) 8
		WRITTEN DESCRIPTION	OCCUP. CODE		(SPECIFY)10			

SECTION 2- EDUCATION

1.	2.	3.	VER THE OUESTIONS. 14.	5.	6.
MARK 'X' IF MEMBER IS 5 YEARS OR OLDER ONLY ASK QUESTIONS IF MEMBER IS 5 YEARS AND OLDER	Can [NAME] read and write in any language?	-	What was the main reason [NAME] never attended school? WORKING (JOB)	What is the highest grade [NAME] completed? USE ATTACHED EDUCATION CODES	Is [NAME] currently attending school? YES
	NO2	YES1	(►Q18)	LEVEL	

7.	8.	9.	10.	11.
Why is [NAME] not		What kind of organization runs		What is the main reason for
currently in school?	is [NAME] attending?	the school that [NAME] is	absent from school	being absent from school?
HAD ENOUGH CHOOLING1 AWAITING DMISSION2 NO SCHOOL/LACK OF TEACHERS3 NO TIME/NO NTEREST4 LACK OF MONEY5 MARITAL OBLIGATION6 SICKNESS7 DISABILITY8 SEPARATION OF ARENTS9 DEATH OF PARENTS10 TOO OLD TO ATTEND	USE EDUCATION CODES AT THE END OF THE QUESTIONNAIRE	GOVERNMENT	last semester for more than a week continuously? YES1 NO2 (▶Q12)	SICK1 DEATH IN THE MILY2 HAD TO WORK3 OTHER (SPECIFY)4
(► Q18)	GRADE			

12.	13.	14.	15.	16.	17.	18.
By what means does [NAME] mainly go to school? FOOT	How much time does it take [NAME] to get to school? (in minutes) 0 - 151 16 - 302 31 - 453 46 - 604 61 - 905 91- 1206 120	Does [NAME] receive any scholarship or assistance to attend school from any organization or the	For the current school year, what is the value of this assistance, including the value of in-kind assistance and cash?	For the current school year, what did the household spend on [NAME]'s	During the past 12 months, what did the household spend on [NAME]'s school books, uniforms, stationary etc for school? ENTER 0 IF NOTHING WAS SPENT	Does [NAME] plan to attend school next year? YES1 NO2
	CODE		BIRR	BIRR	BIRR	

SECTION 3: HEALTH

FOR CHILDREN 10 YEARS AND YOUNGER, ASK THEIR CAREGIVER THE QUESTIONS.

	1.	2.			GIVER THE Q	4.		5.	6a.	6b.	6c.	6d.		
-	During the past	For what re	ason(s) dic	I [NAME]	During the	What was the sick	ness/injury		Whom did [NAME] consult	Where did [NAME]		How long did it		
	4 weeks has	consult this		· [IACIAIF]	past 4	[NAME] faced?			for this illness or injury	receive or consult medical		take to travel (one		
	[NAME]	23			weeks has	[in the last 4 weeks?	assistance primarily?	the first	way) to		
ı	consulted a	LIST UP TO	3 REASONS	S.	[NAME]	LIST UP TO 2 ILLNI	ESSES	activity due to	the last i weeks.	assistance primarily r	consultation,	your first		
I٨	health	2.51 01 10	5 NE/ 15 6 N		suffered			this illness/injury			including any	consultat	ion?	
L	practitioner or	CHECK II	P OR OTHE	R	from an			during the last 4			medicine or test	consultation:		
Lī	traditional	PREVENT	IVE CARE		illness or	MALARIA	1	weeks? If not			prescribed even	IF CONSU	ITATION	
ľ	healer or		NKED TO	1	injury?	DIARRHEA		absent please	TRADITIONAL HEALER.1	HOSPITAL1	if purchased	AT PATIE		
Ľ	visited a health		L CHECKUP		, , , .	INJURY DENTAL		record 0	DOCTOR2	HEALTH CENTER2	elsewhere? If no			
Ľ	facility?	GIVING FOLLOW	BIRTH	3		OPTHALMIC	5		DENTIST3 NURSE4	HEALTH POST3	expenses please	,		
	(Regardless of		MENT FOR	EARLIER		SKIN DISEASE	6		MEDICAL ASST5	CLINICS4 PHARMACY5	record 0.			
ľ	whether sick or	OR	ILLNESS.	4		EAR/NOSE/TH	IROAT		MIDWIFE6 PHARMACIST7	TRADITIONAL		THEN, SK	IP TO	
A	not)	FOLLOWU		4		(ENT) TUBERCULOSI			CHEMIST8	HEALER'S HOME6 PATIENT'S HOME7		▶Q8a		
L			MENT FOR	EARLIER		OTHER			NO ONE9 ▶Q7	OTHER (SPECIFY)8				
	YES1	ACCIDEN NEW OR			YES1	(SPECIFY)	9		OTHER (SPECIFY)10					
ı	NO2				NO2									
D	(►Q3)		URY SPECIFY).		(►Q8a)									
		REASON	REASON	REASON		U.I.N.E.C.C. !!4	III NESS #1 III NESS #2						1	
		#1	#2	#3		ILLNESS #1	ILLNESS #1 ILLNESS #2				BIRR	HOURS	MINUTES	
L											J			
1														
2														
Ľ														
3														
4														
5														
6														
7														
8														
9														
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1														
1														
				<u> </u>										

7.	8a	8b	9a	9b	10.	11.
What was the main reason	Has [NAME]	How many	Were any of	How many	What were the	Is [NAME] currently
for [NAME] not consulting a	consulted any	times has	[NAME]'s	nights did	total costs of all	covered under a
healthcare provider or	medical assistance	[NAME]	consultations	[NAME] spend	[NAME]'s health	health insurance
traditional healer for this	or consulted from	consulted any	inpatient visits	in any health	consultations in	scheme (such as
illnes/injury?	health facilitiesor	medical	(i.e. [NAME]	facility in the	the last 12	through an
	traditional healers	assistance or	spent the night	last 12 months?	months, including	
	during the last 12	consulted from	in the health		any medicine or	community health
LACK OF MONEY1 EXPENSIVE2	months?	health facilities	facility)?		tests prescribed	insurance scheme, or
TOO FAR3	(Regardless of	or traditional				private health
DO NOT BELIEVE IN MEDICINE4	whether sick or not)	healers during the last 12			elsewhere?	insurance)?
LACK OF HEALTH	not)	months?				
PROFESSIONAL5 POOR QUALITY/		months:				
SERVICE6						YES1
DID NOT REQUIRE MEDICAL ASSISTANCE.7	YES1		YES1			NO2
OTHER (SPECIFY)8	NO2		NO2 (▶Q10)			
(0120111)	(▶Q11)		(P Q10)			
		NUMBER		NUMBER	BIRR	

12a.	12.	13.	14.	15.	16.	17.	18.	19.				
			Does [NAME]		Does [NAME]	Using [NAME]'s	ENUMERATOR:	Does this difficulty reduce				
MEMBER AGE	have difficulty	usual language,	CHECK	the amount of work								
0-5 YEARS	seeing, even if	hearing, even	walking or	remembering or	(with self care	does [NAME]	QUESTIONS 12 TO	[NAME] can do at home, at				
OLD?	wearing	if wearing a	climbing	concentrating?	such as)	have difficulty	17. DID THE	work or at school?				
	glasses?	hearing aid?	steps?		washing all over	communicating;	RESPONDENT					
					or dressing,	for example	HAVE ANY					
					feeding,	understanding	DIFFICULTY?					
					toileting etc?	or being						
						understood?						
								YES, ALL THE TIME1				
								YES, SOMETIMES2				
								NA (IF NOT WORKING				
							YES1	OR ATTENDING SCHOOL)4				
							NO2	55.15527				
YES1							(▶Q20)					
(► Q20) NO2												
NO2	QUE	STIONS 12 to 1	7, READ RESPO	INSES:								
				TY								
			PERFORM ACTI									

20.	20a.	20b.	20c.		20d.	20e.	20f.
EU. IS THIS MEMBER AGES 6-107 MONTHS (LESS THAN 9 YEARS OLD & 6 MONTHS AND ABOVE)?	Has [NAME] had diarrhea in the last two weeks?	How much water was [NAME] offered to drink during the diarrhea? LESS THAN USUAL1 THE SAME AS USUAL2	Was [NAME] giv following to drir		Was [NAME] ever breastfed? YES, STILL BREASTFEEDING1 (▶Q20f)		Since the time of birth, for how man months was [NAME] exclusivel breastfed (without food, water, herba tea, or any other liquid, except vitamin A, medicin or ORS)? IF [NAME
YES1 NO2 ► NEXT HH MEMBER	NO2 (►Q 20d)	MORE THAN USUAL3 NOTHING TO DRINK4		2	BREASTFEEDING. (►Q2UI) YES, BUI NO LONGER		HAS NOT YET RECEIVED COMPLEMENTARY FOOD OR LIQUID, RECORD "99"
			ORAL REHYDRATION SALTS (ORS)	FLUID RECOMMENDED BY HEALTH WORKER		MONTHS	MONTHS

21. 21b 22. 23. 24. In what day, month, and year was [NAME] born? ENUMERATOR: WHAT IS THE SOURCE OF DATE OF BIRTH INFORMATION GIVEN IN Q.21? CHECK THAT AGE IN QUESTION 4 OF THE ROSTER AND YEAR OF BIRTH REPOTRED HERE ARE CONSISTENT. EIRTH CERTIFICATE1 VACCINATION CARD2 OTHER DOCUMENTS3 PARENT	D1 D1 D3 D3
Was [NAME] born? THE SOURCE OF DATE OF BIRTH INFORMATION GIVEN IN Q.21? CHECK THAT AGE IN QUESTION 4 OF THE ROSTER AND YEAR OF BIRTH REPOTRED HERE ARE CONSISTENT. BIRTH CERTIFICATE 1 VACCINATION CARD 2 OTHER DOCUMENTS 3 PARENT 4 OTHER (SPECIFY) 5 THE SOURCE OF DATE OF KILOGRAMS (KGS) CENTIMETERS) MEASURE CHILD UNDER 2 YRS OLD MEASURE LENGTH (LYING NOTPRESE SICK OR TINJURED CHILD AGE 2 OR MORE YRS MEASURE HEIGHT)1 NT2
4 OF THE ROSTER AND YEAR OF BIRTH REPOTRED HERE ARE CONSISTENT. BIRTH CERTIFICATE1 VACCINATION CARD2 OTHER DOCUMENTS3 PARENT	ENT2)3 4
2 DIGIT 2 DIGIT 2 DIGIT	
DAY MONTH YEAR EC SOURCE KILOGRAM	
	

	SECTION 4: TIME USE	AND LABOR	FOR CHILDREN	7-10 YEARS, ASK THE	IR CAREGIVER THE	QUESTIONS.					
	1.	2.		3.		4.	5.	6.	7.	8.	9.
I N D	MARK 'X' IF MEMBER IS 7 YEARS OR OLDER ONLY ASK QUESTIONS IF MEMBER IS 7 YEARS AND OLDER	How many hours a [NAME] spend yes water? NOTE: HOURS ANI SPENT YESTERDAY RECORD ZERO IF N PARTICIPATION	sterday collecting D MINUTES	How many hours a [NAME] spend yes collecting firewoor materials)? NOTE: HOURS ANI SPENT YESTERDAY RECORD ZERO IF N PARTICIPATION	terday d (or other fuel D MINUTES	How many hours in the last seven days did [NAME] spend on household agricultural activities (including livestock and fishing-related activities) whether for sale or for household use? NOTE: HOURS SPENT IN LAST 7 DAYS RECORD ZERO IF NO PARTICIPATION	How many hours in the last seven days did [NAME] run or help with any kind of non-agricultural or non-fishing household business, big or small, for his or herself or for the household? RECORD ZERO IF NO PARTICIPATION	in casual, part-time, or temporary labour? RECORD ZERO IF NO PARTICIPATION	days did [NAME] do any work for a	the last seven days did [NAME] engage	At any time over the last 12 months, was [NAME] employed in any kind of job, including part-time labour, for wage, salary, commission or any payment in kind, for anyone who is not a member of the household? EXCLUDE TEMPORARY WORK YES1 NO2 (►Q31)
		HOURS MINUTES		HOURS MINUTES		HOURS	HOURS	HOURS	HOURS	HOURS	NO2 (FQ31)
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											

MAIN JOB OVER THE LAST 12 MONTHS

10.	11.		12.	13.	14.	15.	16.	17.	17b.
Describe [NAME]'s main job over the last 12 months.	Describe what kind of trade or business [NA job over the last 12 months is connected wit (describe the main product or service)	ith.	this main occupation over the last 12 months READ RESPONSES PRIVATE COMPANY1 PRIVATE INVOIVIDUAL.2 GOVERNMENT3 STATE-OWNED ENTERPRISE	months over the last 12 months did [NAME] work at this job?	During these months, approximately on average how many weeks per month did [NAME] work at this job?	many hours per	[NAME] 's last	What period of time did this last payment cover?	How was this payment provded to you?
WRITTEN DESCRIPTION OCCU	I W/RITTEN DESCRIPTION I	INDUSTRY CODE	(PARASTATAL) 4 PUBLIC WORKS PROGRAM	NUMBER OF	NUMBER OF	NUMBER OF	BIRR	HOUR	THROUGH A FORMAL ACCOUNT
				MONTHS	WEEKS / MONTH	HOURS / WEEK			

SECONDARY JOB OVER THE LAST 12 MONTHS

		SECONDARY JOB OVER THE	LAST 12 MONTHS						
18.	19.	20.	21.		22.			24.	
How much does [NAME]	Over what period	At any time over the last 12	Describe [NAME]'s secondary job ove	r the last 12	Describe what kind of trade or business [N	IAME]'s	Is [NAME]'s employer for	In how many	
usually receive in	of time is [NAME]	months, was [NAME] employed	months.		secondary job over the last 12 months is o	onnected with.	this secondary job over the	months over the	
allowances or gratuities,	reporting	for a second job, in any kind of					last 12 months	last 12 months	
including in-kind payments	allowances and	job, including part-time labour,						did [NAME] work	
such as uniform, housing,	gratuity	for wage, salary, commission or					READ RESPONSES	at this job?	
food, and transport, that	payments?	any payment in kind, for anyone							
were not included in the		who is not a member of the							
salary just reported?		household?							
WRITE "0" IF NONE.									
ESTIMATE CASH VALUE OF		EXCLUDE TEMPORARY WORK					PRIVATE COMPANY1		
ANY IN-KIND PAYMENTS							PRIVATEINVDIVIDUAL.2		
RECEIVED.							GOVERNMENT3 STATE-OWNED ENTERPRISE		
	TIME UNIT						(PARASTATAL)4		
IF NOTHING, RECORD ZERO,	HOUR1						PUBLIC WORKS PROGRAM5		
► Q20.	DAY2 WEEK3						CHURCH/RELIGIOUS		
	FORTNIGHT4						ORGANIZATION6 POLITICAL PARTY7		
	MONTH5 QUARTER6		YES1						
	1/2 YEAR7								
	YEAR8 NO					INDUSTRY			
			WRITTEN DESCRIPTION	OCCUP. CODE	WRITTEN DESCRIPTION	CODE		NUMBER OF	
BIRR	1							MONTHS	
BIKIK								WIGHTIS	
	<u> </u>								

PSNP LABOUR

25.	26.	27.	28.	28b.	29.	30.	31.	32.	33.
During these months,	During these	How much was	What period of	How was this payment	How much does [NAME]	Over what period	In the past 12	For how many	How much income
approximately how	weeks,	[NAME]'s last	time did this last	provded to you?	usually receive in allowances	of time is [NAME]	months has	days did [NAME]	did [NAME] get for
many weeks per	approximately how	payment for	payment cover?		or gratuities, including in-	reporting these	[NAME] been	work for the	those days
month did [NAME]	many hours per	wages/salary?			kind payments such as	allowances and	employed as	PSNP program in	worked?
work at this job?	week did [NAME]				uniform, housing, food, and	gratuity	temporary	the last 12	
	work at this job?				transport, that were not	payments?	labour by the	months?	NOTE: REPORT
					included in the salary just		PSNP program?		TOTAL
					reported?				INCOME(CASH AND
					WRITE "0" IF NONE.				IN-KIND) OVER
					ESTIMATE CASH VALUE OF				LAST 12 MONTHS
					ANY IN-KIND PAYMENTS				FROM PSNP.
					RECEIVED.				
				THROUGH A FORMAL ACCOUNT2					
			TIME UNIT		IF NOTHING, RECORD ZERO,	TIME UNIT			
			HOUR1 DAY2	BANKING SERVICES.3 THROUGH A REGULATED	▶Q31.	HOUR1 DAY2			
			WEEK3	MONEY TRANSFER		WEEK3			
			FORTNIGHT4 MONTH5	SERVICE4 OTHERS SPECIFY5		FORTNIGHT4 MONTH5	YES1		
			QUARTER6			QUARTER6	NO2		
NUMBER OF	NUMBER OF	DIDD	1/2 YEAR7 YEAR8			1/2 YEAR7 YEAR8	(►Q34)		
WEEKS / MONTH	HOURS / WEEK	BIRR			BIRR			DAYS	BIRR

OTHER TEMPORA	RY/CASUAL LA	BOUR	UNPAID LABOUR, 12 MOS							
34.	35.	36.	37.	38.						
porary labour work in the past 12	days did	How much income did [NAME] get for those days worked in total?	At any time over the last 12 months, did [NAME] work for other households, free of charge, as exchange labourer or to assist for nothing in return?	Over the last 12 months, for how many households in total did [NAME] work as exchange labourer or to assist for nothing in return?						
YES1 NO2			YES1 NO2	NUMBER						
(►Q37)			► NEXT HH MEMBER	OF HHs						
	DAYS	BIRR		IN TOTAL						

SECTION 4B- SAVINGS

ENUMERATOR: THIS MODULE IS FOR HOUSEHOLD MEMBERS 18 AND OLDER ONLY

	1.	2.	3.					4.				5.	6.	7.
	IS HOUSEHOLD	An account can	At which in	stitution(s	s) do you currentl	y have a r	egistration	In the la	st 12 month	s, have you	used any	Do you	Do you	In the last
	MEMBER 18	be used to take	or account	book?				of the fo	ollowing prod	ducts or ser	vices?	know	know what	12 months,
	YEARS OR	a loan, save,										where to	to do if	have you
	OLDER?				if they own a reg			Ask eacl	h responden	t if they use	!	complain if	1.	saved in
		or receive			ollowing institution							you have	financial	any way
١.		wages.	1.		h); (ii) Public Banl							any	institution	(like equb
) Microfinance In:							problems	fails?	or savings
N					g and Credit Coop		ike Alte) or					with a		account)?
D		registration or	(v) Other fo	rmal fina	ncial institutions (specify).						financial		
		account book										service		
٧		at a bank,										provider?		
1		microfinance												
D		institution,			YES1				YES	1				
U		SACCO, mobile			NO2				NO					
Α		banking (M-Birr and hello cash)												
L		or other formal												
I		financial												
l i	YES1 NO2	institution?												
D	(►NEXT	,												
Ī	MEMBER)											YES1 NO2	YES1 NO2	YES1 NO2
	,	YES1										NO2	1102	(▶Q13)
		NO2												(-, -,
		(►Q7)												
			PRIVATE	PUBLIC	MICROFINANCE	SACCO	OTHER	ATM/	ONLINE	MOBILE	AGENT			
			BANK	BANK	BANK		(specify)	DEBIT	BANKING	BANKING	BANKING			
-								CARD						
1														
2														
3														
4														
5														
6														
7														
8														
9														
10														
11														
-														
12														

8.	9.					10.					11.					12.				
What is the main reason that you saved money? EMERGENCIES1 HEALTH OR MEDICAL	Ask each resinstitutions Banks (like C	cial instituti spondent if t (i) Private Ba Commercial like Omo or	did you save in an ons? they saved at any anks (like Dashan Bank of Ethiopia) Sidama); (iv) Savi or (v) Other forma	of the follo or Awash); ; (iii) Microf ng and Cred	owing wing (ii) Public inance lit	How often d institutions?		n each of the folk	owing form		of the follo	owing ways	did you informal ? if they saved in ar		·	informal methods? ROUND UP TO THE NEAREST TIME FRAME				
EXPENSES	NO.	1 2 ► Q11)				DAILY					YES1 No2 (▶Q13)					DAILY				
	PRIVATE BANK BANK BANK SACCO OTHER (specify)				PRIVATE BANK	PUBLIC BANK	MICROFINANCE BANK	SACCO	OTHER (specify)	HOME (CASH)	FRIENDS/ FAMILY	ASSOCIATION	EQUB	OTHER (specify)	HOME (CASH)	FRIENDS/ FAMILY	ASSOCIATION	EQUB	OTHER (specify)	

13.	14.		15.	16.					
On average, how often	ENUMERATO	OR: SKIP IF RE	SPONENT	Insurance is when you		12 months, how	did yo	u insure y	ourself?
would you be able to	HAS A FORM	AL ACCOUNT	(ANSWERED	pay small amounts of					
save 600 Birr?	'YES' TO Q2).			money over time to an					
				insurance provider					
ROUND UP TO THE	Why doesn't	[NAME] own	an account	that will compensate					
NEAREST TIME FRAME	for things like	e saving or tra	insferring	you in case of					
	money? REA	D OUT EACH	ANSWER,	unexpected shocks					
	LIST MAXIMU	JM OF 3 REAS	ONS.	(for example on your					
				livestock or health).					
DAILY	PROCEDURE IS TOO COMPLEX OR HAS TOO MANY REQUIREMENTS. 1 FINANCIAL INSTITIUTIONS ARE TOO FAR 2 ACCOUNTS ARE TOO EXPENSIVE TO USE 3 I DON'T UNDERSTAND THE BENEFITS 4 I DON'T KNOW WHERE OR HOW TO OPEN AN CCOUNT 5 PREFER INFORMAL SERVICES. 6 RELIGIOUS REASONS 7 I DO NOT TRUST BANKS 8		In the last 12 months, have you owned/used any formal insurance product (like life insurance)?	u owned/used nal insurance (like life SKIP TO ▶Q) 18		
	I DON'T HA	VE A REASON.	9	YES1 NO2					
	OTHER (SPEC	IFY)	10	(►Q17)	PRIVAT INSURANCE COMPANIES (LIKE NILE OR NICE)	PUBLIC INSURANCE COMPANIES (LIKE ETHIOPAN INSURANCE CORPORATION)			
					\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	RAI (LIK		Ę _	AAI
					ES SE	LES N	84	N N N	ORN ION
	1ST	2ND	3RD		PRIVAT INSURANC COMPANIES (LIKE NILE OR NICE)	PUBLIC INSURANC COMPANIES (LIKE ETHIOPAN INSURANCE CORPORATION)	EMPLOYER	MICROFINANCE	OTHER FORMAL FINANCIAL INSTITUTION (SPECIFY)
					NE C	JBLI JMF JHIC SUF	ΛΡL	STI	NAN STIT
					E O Z	Z 2 E Z 2	ы	ΣΖ	OFIN
	1	l .	l.	l	1				l .

17.			18.	19.					20.	21.	22.
Why don't	you use form	nal	In the past 12	Are you far	niliar with	any of the f	ollowing terms	before	Would you	Do you know	Are you
insurance s	ervices?		months, were	this study (today):				prefer to save	how to open	worried about
READ OUT I	EACH ANSW	ER, SELECT	you a member of						money at a		being able to
	OF 3 REASO		Iddir?							a formal	cover
									institution,	financial	unexpected
									through informal		expenses?
									methods or	(like a bank,	скрепьсь.
DOESN'	THINK FOR	MAL							both?	MFI or	
INSURA	NCE IS									SACCO)?	
DOESN'		D WAHT									
INSURA	NCE IS2										
	OT TRUST IN										
	NCE IS TOO										
	IVE TO USE.										
PREFER						YES	1				
INFROM	AL SECTOR	6				NO	2		Formal		
	NCE PROVIDE								Financial Institutions		
NO REAS	SON	8							1		
OTHER	(SPECIFY)	9							INFORMAL2		
									вотн3		
			YES1 NO2							YES1 NO2	YES1 NO2
1ST	2ND	3RD		AGENT	ATM	MOBILE	COLLATERAL	INTEREST			
				BANKING		BANKING	(MEAJA)	(WELEDE)			

SECTION 5A: FOOD LAST 7 DAYS

JEC	TION 5A: FOOD LAST / DAYS	1_		1_			1_		-	
	1.	2.		3.		4.	5.		6.	
	Over the past one week (7 days), did you or others in your household	How much in to	•	How much came	e from	How much did	How much cam	e from own	How much came	-
	consume any [ITEM]?	household cons	ume in the	purchases?		you spend?	production?		and other sources?	
0	INCLUDE FOOD BOTH EATEN COMMUNALLY IN THE HOUSEHOLD AND	past week?		IF NONE RECOR	D 0 AND SKIP		IF NOT CONSUN		IF NONE RECOF	۱D 0.
0	THAT EATEN SEPARATELY BY INDIVIDUAL HOUSEHOLD MEMBERS.			TO Q5.			OWN PRODUCT 0.	ION RECORD		
D							0.			
	YES1							CEELINIT		SEE UNIT
1	NO2 ► NEXT ITEM	_	SEE UNIT		SEE UNIT			SEE UNIT	,	SEE UNIT
D		С	ODES ABOVE	C	ODES ABOVE		,	TODES ABOVI		T
		QUANTITY	UNIT CODE	QUANTITY	UNIT CODE	BIRR	QUANTITY	UNIT CODE	QUANTITY	UNIT COD
	CEREALS									
1	Teff									
2	Wheat									
3	Barley									
4	Maize									
5	Sorghum									
6	Millet									
60	Other cereal (SPECIFY)									
	PULSES & NUTS	1	1	ı		1	ı		1	Т
7	Horsebeans									_
8	Field Pea									
9	Chick Pea									
10	Lentils									
11	Haricot Beans									
110	Ground nuts									
111	Other pulse or nut (SPECIFY)									

SECTION 5A: FOOD LAST 7 DAYS

SECT	ION 5A: FOOD LAST 7 DAYS										
	1.		2.		3. 4.		5.		6.		
F O O D	consume any [ITEM]?		How much in tot household consu past week?		purchases? you spend? IF NONE RECORD 0 AND SKIP TO Q5.		How much came from own production? IF NOT CONSUMED FROM OWN PRODUCTION RECORD 0.		How much came from gifts and other sources? IF NONE RECORD 0.		
I D	YES1 NO2 ► NEXT ITEM			SEE UNIT DDES ABOVE	C	SEE UNIT ODES ABOVE		C	SEE UNIT ODES ABOVI	C	SEE UNIT ODES ABOVE
			QUANTITY	UNIT CODE	QUANTITY	UNIT CODE	BIRR	QUANTITY	UNIT CODE	QUANTITY	UNIT CODE
	SEEDS (UNPROCESSED)									_	
12	Niger Seed										
13	Linseed										
131	Other seed (SPECIFY)										
	VEGETABLES		,						T		
14	Onion										
141	Green chili pepper (kariya)										
142	Red pepper (berbere)										
143	Greens (kale, cabbage, etc.)										
144	Tomato										
145	Other vegetable (SPECIFY)										
	FRUITS		1			ı			ı	T	
15	Banana										
151	Orange										
152	Other fruit (SPECIFY)										
	TUBERS & STEMS					ı			ı	T	
16	Potato										
17	Kocho										
26	Bula										
170	Sweet potato										
171	Boye/Yam										
172	Cassava										
173	Godere										
174	Other tuber or stem (SPECIFY)										

SECTION 5A: FOOD LAST 7 DAYS

SECT	TION 5A: FOOD LAST 7 DAYS										
	1.		2.		3.		4.	5.		6.	
F O O D	consume any [ITEM]?		How much in tot household consu past week?		How much came purchases? IF NONE RECORI TO Q5.		How much did you spend?	How much came from own production? IF NOT CONSUMED FROM OWN PRODUCTION RECORD 0.		How much came from gifts and other sources? IF NONE RECORD 0.	
I D	YES1 No2 ▶ NEXT ITEM		cc	SEE UNIT DDES ABOVE	C	SEE UNIT ODES ABOVE		C	SEE UNIT ODES ABOVE	C	SEE UNIT ODES ABOVE
			QUANTITY	UNIT CODE	QUANTITY	UNIT CODE	BIRR	QUANTITY	UNIT CODE	QUANTITY	UNIT CODE
	MEAT, POULTRY, & FISH										
180	Goat & mutton meat										
181	Beef										
182	Poultry										
183	Fish										
	OTHER										
19	Milk										
20	Cheese										
201	Butter/ghee										
202	Oils (processed)										
21	Eggs										
22	Sugar										
23	Salt										
	BEVERAGES & STIMULANTS		1	1		1	1	1			
24	Coffee										
203	Теа										
204	Soft drinks/Soda										
205	Beer										
206	Tella										
25	Chat / Kat										
	BEVERAGES & STIMULANTS		1					1		1	
195	PuUrchased Injera										
196	Purchased Bread or Biscuits										
197	Pasta/Maccaroni										
198	Other prepared food and consumed at Home										

		CONSU	MPTION UNITS
UNIT	SIZE	UNIT CODE	
Kilogram		1	Kunna/N
Gram		2	Kunna/N
Litres		4	Kunna/N
Centilitres		5	
Jog		8	
Melekiya		9	
Birchiko	Small	31	
Birchiko	Medium	32	
Birchiko	Large	33	
		-	
Esir	Small	61	
Esir	Medium	62	
Esir	Large	63	
Festal	Small	71	
Festal	Medium	72	
Festal	Large	73	
		-	Tasa/Tanika/S
Kerchat/Kemba	Small	91	Tasa/Tanika/S
Kerchat/Kemba	Medium	92	Tasa/Tanika/S
Kerchat/Kemba	Large	93	
Kubaya/Cup	Small	101	
Kubaya/Cup	Medium	102	
Kubaya/Cup	Large	103	
-			I

UNIT	SIZE	UNIT CODE
Kunna/Mishe/Kefer/Enkib	Small	111
Kunna/Mishe/Kefer/Enkib	Medium	112
Kunna/Mishe/Kefer/Enkib	Large	113
		-
Medeb	Small	131
Medeb	Medium	132
Medeb	Large	133
Piece/number	Small	141
Piece/number	Medium	142
Piece/number	Large	143
		-
Sahin	Small	151
Sahin	Medium	152
Sahin	Large	153
Sini	Small	171
Sini	Large	172
Tasa/Tanika/Shember/Selemon	Small	181
Tasa/Tanika/Shember/Selemon	Medium	182
Tasa/Tanika/Shember/Selemon	Large	183
_	_	
Zorba/Akara	Small	191
Zorba/Akara	Medium	192
Zorba/Akara	Large	193
Other (Specify)		900

SECTION 5B: FOOD AGGREGATE

$\overline{}$	FION 5B: FOOD AGGREGATE	1.	2.
-			
		In the past one week (7 days),	Over the past one week (7
		did you or anyone in your	days), how many <u>days</u> did
		household consume any	you or others in your
		[ITEM]?	household consume any
		YES1	[ITEM]?
		NO2 ► NEXT ITEM	
	ITEM	► NEXT HEW	NUMBER OF DAYS
1	TEFF		
2	Other cereal (rice, sorghum, millet, maize, wheat bread, et	tc)	
3	Potatoes and other root crops		
4	Pasta, Macaroni and Biscuits		
5	Sugar or sugar products (honey, jam)		
6	Beans, Haricot Beans, lentils, nuts and other pulses		
7	Vegetables (including relish and leaves)		
8	Fruits		
9	Beef, sheep, goat, or other red meat and pork		
10	Poultry		
11	Eggs		
12	Fish		
13	Oils/fats/butter		
14	Milk/yogurt/cheese/other dairy		
15	Other condiments (Spice, Salt, Pepper, etc)		
16	Kocho/Bula		

3.						
Over the past one week (7 days), did any people that you did not list as						
household members [READ LIST FROM HH ROSTER] eat any meals in your household?						
YES1 NO2 (▶Q6)						

		4.	5.
	R Q4-5: NOT SHARED, RECORD ZERO.	What was the total number of days in which any meal was shared with people []?	What was the total number of meals that were shared over past 7 days with []?
		NUMBER OF DAYS	NUMBER OF MEALS
Α	Children 0-5 years		
В	Children 6-15 years		
С	Adults 16-65 years		
D	People over 65 years old		

			6.	7.
			In the past 7 days, did members of this household consume any of the following meals or drinks away from home?(from resturants, relatives or friends)	How much did you or other household members pay, in total in the last 7 days for [MEAL/DRINK]? If free, please estimate what it would have cost if you had to pay.
	MEAL		YES1 NO2 ▶ NEXT ITEM	
A		Breakfast	PINEATHEM	BIRR
В	teff/millet/barley with any type of stew, kocho/kocho with meat, rice with sauce,	Lunch		
С	etc.)	Dinner		
D	Snacks such as Kolo, bread, biscuits, cakes, et	с.		
E	Dairy based beverages such as milk, yoghurt e	tc.		
F	Vegetables and roasted or boiled items such a boiled/roasted corn, sugar cane etc)	s (carrot, potatoes,		
G	Non alcoholic drinks (coffee, tea, fruit juice, soda etc.)			
Н	Alcoholic drinks			

SECTION 6: NON-FOOD EXPENDITURE

LAST ONE MONTH

	1.		2.
I T E M	Over the past <u>one month</u> , did your household purchase or pay for any [ITEM]?		How much did your household pay in total?
C O D		YES1 NO2 ►NEXT ITEM	BIRR
1	Matches		
2	Batteries		
3	Candles (tua'af), incense		
4	Laundry soap/OMO/endod/besana leaves		
5	Hand/body soap		
6	Other personal care goods (incl.sendel,matent,)		
7	Charcoal		
8	Firewood		
9	Kerosene		
10	Cigarettes, tobacco, suret, gaya		
11	Transport		
12	House rent		

LAST 12 MONTHS

	3.		4.
I T E M	Over the past <u>12 months</u> , did your household purchase or pay for any [ITEM]?		How much did your household pay in total?
C O D E		YES1 NO2 ►NEXT ITEM	BIRR
1	Clothes/shoes/fabric for MEN (18 years and older)		
2	Clothes/shoes/fabric for WOMEN (18 years and older)		
3	Clothes/shoes/fabric for BOYS (less than 18 years)		
4	Clothes/shoes/fabric for GIRLS (less than 18 years)		
5	Kitchen equipment (cooking pots, etc.)		
6	Linens (sheets, towels,blankets)		
7	Furniture (Chair, table, closet etc.)		
8	Lamp/torch		
9	Ceremonial expenses		
10	Contributions to IDDIR		
11	Donations to the churches and mosques		
12	Taxes and levies		

SECTION 7: FOOD SECURITY

1.	2.			3.									
In the past 7	In the past 7	days, how mar		How many meals, including breakfast									
days, did you	are taken on a												
worry that	IF NO DAYS, F	NO DAYS, RECORD ZERO. household?											
your													
household	Α	В	С	D	Е	F	G	Н					
would not									A.	В.			
have enough									5 yrs and above	Children			
food?										(6-59 months)			
	Rely on less	Limit the	Limit portion		Restrict consumption	Borrow food, or	Have no food of any	Go a whole day					
	preferred	variety of	size at meal-	Reduce number of	by adults for small	rely on help from a	kind in your house-	and night without		LEAVE BLANK IF NO			
YES1	foods?	foods eaten?	times?	meals eaten in a day?	children to eat?	friend or relative?	hold?	eating anything?		CHILDREN			
NO2													
	DAYS	DAYS	DAYS	DAYS	DAYS	DAYS	DAYS	DAYS	NUMBER	NUMBER			

4.	5.			6.	7.												8.		
Do all	Who in the ho	ousehold usua	lly eats a	In the last 12	In which months of the last 12 months did you experience this incident?								What was the cause of this						
household	more diverse variety of foods, a less months, have you														situation?				
members eat	diverse variety of foods? been faced with a					MARK X IN EACH COLUMN FOR 2007, 2008													
roughly the	situation wher				, '								LIST UP TO 3 IN ORDER OF						
same diet?	MORE DIVERSE1 did not ha																IMPORTAI	NCE; USE C	ODES
	LESS DIVERSE	2		enough food to													ON THE B	оттом.	
				feed the													3.4 23 6.14.		
				household?															
										20	007 (E	C)							
YES1										Feb	Mar	Apr	May	Jun	Jul	Aug			
(► Q6) NO2	А	В	С	YES1															
				NO2 ► NEXT SECTION						2	008 (E	C)					A.	В.	C.
			Children																
	Men	Women	(6-59 months)		Sep	Oct	Nov	Dec	Jan								1ST	2ND	3RD

CODES FOR Q8
INADEQUATE HOUSEHOLD STOCKS DUE TO DROUGHT/POOR RAINS1
INADEQUATE HOUSEHOLD FOOD STOCKS DUE TO CROP PEST DAMAGE2
INADEQUATE HOUSEHOLD FOOD STOCKS DUE TO SMALL LAND SIZE3
INADEQUATE HOUSEHOLD FOOD STOCKS DUE TO LACK OF FARM INPUTS4
INADEQUATE HOUSEHOLD FOOD STOCKS DUE TO LACK OF FARM
TOOLS/DROUGHT ANIMALS, PLOUGH ETC5

FOOD IN THE MARKET WAS VERY EXPENSIVE			. 6
NOT ABLE TO REACH THE MARKET DUE TO HIGH TRANSPORTATION C	OST	3	. 7
MARKET VERY FAR FROM THE VILLAGE			
NO FOOD IN THE MARKET			
FLOODS/WATER LOGGING/HAILSTORM			
OTHER, SPECIFY			

SECTION 8: SHOCKS

SECI	ON 8: SHOCKS													
		1.	2.		3.					4.			5.	6.
		During the last	Rank the		As a resul	t of this	[SHOCK], di	d your []	What did y	our household	do in	During the	During the
		12 months,	three most							response to	this [SHOCK]	to try to	last 12	last 2 years,
		was your	significant		READ RES	PONSES	FOR EACH (COLUMN		regain your	former welfa	re level?	months, how	how many
		household	shocks you										many times	times did
С		affected by	experienced -		INCR	EASE	1			LIST UP TO	3 ANSWERS B	Y ORDER	did [SHOCK]	[SHOCK]
0		[SHOCK]?	Most Severe		DECR	EASE	2			OF IMPORT	TANCE. USE CO	DDES ON	occur?	occur?
D			(1), Second		DID	NOT CHA	NGE3			THE RIGHT				
E			Most Severe											
			(2), Third											
		YES1	Most Severe						1		1		<u> </u>	
		1E51	(3).											
		NO2	(3).		INCOME	ASSETS	FOOD	FOOD	FOOD	1ST	2ND	3RD		
		► NEXT SHOCK				7.002.0	PRODUC.	STOCKS	PURCH.	10.	2.12	55		
	SHOCK													
	Death of household member (Main bread			1					l					
101	,													
	earner) Death of Underfive children or abortion			•										
101a	Stillbirth													
-	Stillbirtii			ł										
101b	Death of other household member													
102	Illness of household member			THE										
	Loss of non-farm jobs of household			l										
103	member			QUESTIONS										
104	Drought			TO THE										
105	Flood			RIGHT SHOULD										
103	Landslides/			SHOOLD										
106	Avalanches													
107	Heavy rains preventing work			1										
	Other crop damage													
109	Price fall of food items			1									†	
110	Price rise of food items			i							1			
				THE										
111	Increase in price of inputs (seed, fertilizer)													
112	Great loss/death of livestock			QUESTIONS							1			
113	Fire			TO THE RIGHT										
114	Theft/Robbery and other violence			SHOULD							1			
115	Involuntary loss of house/land			ONLY BE							1			
	Displacement (due to government			ASKED							1			
116	development projects)			CONCERNIN										
117	Local Unrest/Violence			G THE THREE							1			
118	Other (Specify)			MOST										
118	отнег (эреспу)			<u>IVIUS I</u>					l			1		

CODES FOR Q4:	
RELIED ON OWN SAVINGS1	
RECEIVED UNCONDITIONAL HELP	
FROM	
RELATIVES/FRIENDS2	
RECEIVED UNCONDITIONAL	
HELP FROM GOVERNMENT3	
RECEIVED UNCONDITIONAL	
HELP FROM NGO/RELIGIOUS	
INSTITUTION4	
CHANGED EATING PATTERNS (RELIE	D
ON LESS PREFERRED FOOD OPTIONS	,
REDUCED THE PROPORTION OR	
NUMBER OF	
MEALS PER DAY, OR	
HOUSEHOLD MEMBERS SKIPPED	
DAYS OF EATING,	
ETC.)5	
EMPLOYED HOUSEHOLD MEMBERS	
TOOK ON MORE	
EMPLOYMENT6	
ADULT HOUSEHOLD MEMBERS WHO	
WERE PREVIOUSLY NOT WORKING	
HAD TO FIND WORK7	
HOUSEHOLD MEMBERS	
MIGRATED8	
REDUCED EXPENDITURES ON HEALTH	
AND/OR EDUCATION9	
OBTAINED CREDIT10	
SOLD AGRICULTURAL ASSETS11	
SOLD DURABLE ASSETS12	

SECTION 9: HOUSING

2.		3.	4.	5.	6.	7.	8.
How long has this		On what basis does the	How many rooms	The walls of the main dwelling	The roof of the main	The floor of the main	What type of kitchen does the
household been liv	ving in	household occupy the dwelling?	(excluding	are predominantly made of	dwelling is predominantly	dwelling is predominantly	household use?
this dwelling?			kitchen, toilet and	what material?	made of what material?	made of what material?	
YEARS M	иоптнѕ	PRIVATELY OWNED1 FREE OF RENT2 RENTED3 OTHER (SPECIFY)4	bath room) does the household occupy?	WOOD AND MUD	CORRUGATED IRON SHEET	MUD/DUNG. 1 BAMBOO /REED 2 WOOD PLANKS. 3 PARQUET OR POLISHED WOOD. 4 CEMENT SCREED. 5 PLASTIC TILES. 6 CEMENT TILES. 7 BRICK TILES. 8 CCRANIC/MARBLE TILES. 9 OTHERS. 10	NO KITCHEN
9.		10.	10b	10c	10d	10e	12.
9. What is the primar		What type of toilet facilities does	Is this toilet	Is there a place in your dwelling	At this moment, is there	At this moment, do you	What type of solid waste
9. What is the primar oven (Mitad) used baking Injera/brea	for				At this moment, is there water available at this hand washing location?	At this moment, do you have any soap, detergent,	
oven (Mitad) used	for d? TAD LE1 TAD)2 Y RURAL3	What type of toilet facilities does	Is this toilet facility shared with other	Is there a place in your dwelling or yard/plot where household	At this moment, is there water available at this hand washing location?	At this moment, do you have any soap, detergent, ash, mud, or sand available	What type of solid waste disposal facilities does the

13.		13b.	13c.	13d.	13e.	14.		14b.
What is the main source of drinking	ng water in the rainy	Where is the source	How long does it take	Out of which time spent for	In the dry season, is your	What is the main source of drinking water in the d	'ry season?	Where is the source
season?		located?	to go there (the source	waiting.	household's main source		1	located?
			of water indicated in	(in minutes)	of drinking water		I	
PIPED WATER INTO DWELLING			Q13b), get water, and		different than your main		1	IN THE
			come back? (in		source in the rainy	PIPED WATER INTO DWELLING	iA	DWELLING1 ▶15A
PIPED WATER INTO YARD/PLOT		IN THE DWELLING1 ▶13E PRIVATE YARD/PLOT2 ▶13E NEIGHBOR'S YARD/SHARED COMPOUND3 PUBLIC SPACE4	LESS THAN 151 16-30	LESS THAN 151 16-302 31-453 46-604 61-905 91-1206 MORE THAN 1207	season? YES1 NO2 (▶Q15A)	PIPED WATER INTO YARD/PLOT		PRIVATE YARD/FLOT2 ▶15A NEIGHBOR'S NEIGHBOR'S YARD/SHARED COMPOUND3 PUBLIC SPACE4
	14d.		16a.	16b.	17.	18.	19.	
How long does it take to go	Out of which time spent for	During the past month,	Do you do anything to	What do you do to make the	Does any member of the	How many buildings and dwellings does the	What is the main Source	e of light for the
How long does it take to go there (the source of water	Out of which time spent for waiting.	During the past month, how much did you pay	Do you do anything to the water to make it		Does any member of the household (including the	How many buildings and dwellings does the household own in total, including other houses	What is the main Source household?	J
How long does it take to go there (the source of water indicated in Q14b), get water,	Out of which time spent for	During the past month, how much did you pay for water, including any	Do you do anything to the water to make it safer to drink?	What do you do to make the	Does any member of the household (including the household head) own	How many buildings and dwellings does the	What is the main Source household? IF THE RESPONSE TO TH	J
How long does it take to go there (the source of water indicated in Q14b), get water, and	Out of which time spent for waiting.	During the past month, how much did you pay for water, including any fees or costs of	Do you do anything to the water to make it safer to drink? REFERS TO THE WATER	What do you do to make the	Does any member of the household (including the household head) own another building,	How many buildings and dwellings does the household own in total, including other houses	What is the main Source household? IF THE RESPONSE TO TH SKIP TO Q21	HIS QUESTION IS CODE 5-13
How long does it take to go there (the source of water indicated in Q14b), get water,	Out of which time spent for waiting.	During the past month, how much did you pay for water, including any fees or costs of transportation, delivery,	Do you do anything to the water to make it safer to drink? REFERS TO THE WATER THEY ARE	What do you do to make the water safe for drinking?	Does any member of the household (including the household head) own another building, dwelling, or house?	How many buildings and dwellings does the household own in total, including other houses	What is the main Source household? IF THE RESPONSE TO TH SKIP TO Q21 ELECTRICITY ELECTRICITY	HIS QUESTION IS CODE 5-13 (METER- PRIVATE1 (METER- SHARED2
How long does it take to go there (the source of water indicated in Q14b), get water, and	Out of which time spent for waiting.	During the past month, how much did you pay for water, including any fees or costs of transportation, delivery,	Do you do anything to the water to make it safer to drink? REFERS TO THE WATER	What do you do to make the water safe for drinking? BOIL1	Does any member of the household (including the household head) own another building, dwelling, or house? EXCLUDING	How many buildings and dwellings does the household own in total, including other houses	What is the main Source household? IF THE RESPONSE TO TH SKIP TO Q21 ELECTRICITY ELECTRICITY ELECTRICITY	HIS QUESTION IS CODE 5-13 (METER- PRIVATE1 (METER- SHARED2 (FROM GEMERATOR3
How long does it take to go there (the source of water indicated in Q14b), get water, and come back? (in minutes)	Out of which time spent for waiting.	During the past month, how much did you pay for water, including any fees or costs of transportation, delivery, etc for this water?	Do you do anything to the water to make it safer to drink? REFERS TO THE WATER THEY ARE	What do you do to make the water safe for drinking? BOIL1 ADD BLEACH/CHLORINE	Does any member of the household (including the household head) own another building, dwelling, or house?	How many buildings and dwellings does the household own in total, including other houses	What is the main Source household? IF THE RESPONSE TO TH SKIP TO Q21 ELECTRICITY ELECTRICITY ELECTRICITY ELECTRICITY SOLAR ENERG	HIS QUESTION IS CODE 5-13 (METER- PRIVATE 1 (METER- SHARED 2 (FROM GENERATOR 3) (Y 4
How long does it take to go there (the source of water indicated in Q14b), get water, and come back? (in minutes) LESS THAN 151 16-302	Out of which time spent for waiting. (in minutes) LESS THAN 151 16-302	During the past month, how much did you pay for water, including any fees or costs of transportation, delivery,	Do you do anything to the water to make it safer to drink? REFERS TO THE WATER THEY ARE	What do you do to make the water safe for drinking? BOIL1 ADD BLEACH/CHLORINE 2 USE A WATER	Does any member of the household (including the household head) own another building, dwelling, or house? EXCLUDING	How many buildings and dwellings does the household own in total, including other houses owned? SUM UP ALL HOUSES OWNED BY HOUSEHOLD MEMBERS	What is the main Source household? IF THE RESPONSE TO TH SKIP TO Q21 ELECTRICITY ELECTRICITY ELECTRICITY SOLAR ENERG BIO -GAS ELECTRICAL I	HIS QUESTION IS CODE 5-13 / METER- PRIVATE1 / METER- SHARED2 / FROM GENERATOR3 / Y45 BATTERY6
How long does it take to go there (the source of water indicated in Q14b), get water, and come back? (in minutes) LESS THAN 151 16-302 31-453 46-604	Out of which time spent for waiting. (in minutes) LESS THAN 151	During the past month, how much did you pay for water, including any fees or costs of transportation, delivery, etc for this water?	Do you do anything to the water to make it safer to drink? REFERS TO THE WATER THEY ARE	What do you do to make the water safe for drinking? BOIL1 ADD BLEACH/CHLORINE 2 USE A WATER FILTER3	Does any member of the household (including the household head) own another building, dwelling, or house? EXCLUDING	How many buildings and dwellings does the household own in total, including other houses owned? SUM UP ALL HOUSES OWNED	What is the main Source household? IF THE RESPONSE TO TH SKIP TO Q21 ELECTRICITY ELECTRICITY ELECTRICITY SOLAR ENERGE BIO -GAS ELECTRICAL I LANTERN	HIS QUESTION IS CODE 5-13 (METER- PRIVATE1 (METER- SHARED2 (FROM GENERATOR3 345
How long does it take to go there (the source of water indicated in Q14b), get water, and come back? (in minutes) LESS THAN 151 16-302 31-453 46-604 61-905	Out of which time spent for waiting. (in minutes) LESS THAN 151 16-302 31-453 46-604 61-905	During the past month, how much did you pay for water, including any fees or costs of transportation, delivery, etc for this water?	Do you do anything to the water to make it safer to drink? REFERS TO THE WATER THEY ARE USING/DRINKING NOW.	What do you do to make the water safe for drinking? BOIL1 ADD BLEACH/CHLORINE2 USE A WATER FILTER3 SOLAR ISINFECTION4	Does any member of the household (including the household head) own another building, dwelling, or house? EXCLUDING	How many buildings and dwellings does the household own in total, including other houses owned? SUM UP ALL HOUSES OWNED BY HOUSEHOLD MEMBERS	What is the main Source household? IF THE RESPONSE TO TH SKIP TO Q21 ELECTRICITY ELECTRICITY ELECTRICITY SOLAR ENERG' BIO -GAS ELECTRICAL LANTERN LIGHT FROM! SWITCH	HIS QUESTION IS CODE 5-13 / METER- PRIVATE 1 / METER- SHARED 2 / FROM GENERATOR 3 3 5 BATTERY 6 - 7 DRY CELL WITH 8
How long does it take to go there (the source of water indicated in Q14b), get water, and come back? (in minutes) LESS THAN 151 16-302 31-453 46-604	Out of which time spent for waiting. (in minutes) LESS THAN 151 16-302 31-453 46-604	During the past month, how much did you pay for water, including any fees or costs of transportation, delivery, etc for this water?	Do you do anything to the water to make it safer to drink? REFERS TO THE WATER THEY ARE	What do you do to make the water safe for drinking? BOIL1 ADD BLEACH/CHLORINE2 USE A WATER FILTER3 SOLAR	Does any member of the household (including the household head) own another building, dwelling, or house? EXCLUDING	How many buildings and dwellings does the household own in total, including other houses owned? SUM UP ALL HOUSES OWNED BY HOUSEHOLD MEMBERS	What is the main Source household? IF THE RESPONSE TO TH SKIP TO Q21 ELECTRICITY ELECTRICITY SOLAR ENERGY BIO "GAS." ELECTRICITY SOLAR ENERGY BIO "GAS." ELECTRICAL ILANTERN LIGHT FROM I SWITCH KEROSENE LI	HIS QUESTION IS CODE 5-13 (METER- PRIVATE . 1
How long does it take to go there (the source of water indicated in Q14b), get water, and come back? (in minutes) LESS THAN 151 16-30	Out of which time spent for waiting. (in minutes) LESS THAN 151 16-302 31-453 46-604 61-905 91-1206	During the past month, how much did you pay for water, including any fees or costs of transportation, delivery, etc for this water?	Do you do anything to the water to make it safer to drink? REFERS TO THE WATER THEY ARE USING/DRINKING NOW.	What do you do to make the water safe for drinking? BOIL1 ADD BLEACH/CHLORINE2 2 USE A WATER FILTER3 SOLAR ISINFECTION4 LET IT STAND AND SETTLE5 OTHER,	Does any member of the household (including the household head) own another building, dwelling, or house? EXCLUDING MAID/GUARDS	How many buildings and dwellings does the household own in total, including other houses owned? SUM UP ALL HOUSES OWNED BY HOUSEHOLD MEMBERS	What is the main Source household? IF THE RESPONSE TO TH SKIP TO Q21 ELECTRICITY ELECTRICITY SOLAR ENERGY BIO -GAS. ELECTRICITY SOLAR ENERGY BIO -GAS. LIGHT FROM IN SWITCH	METER- PRIVATE1 METER- SHARED2 FROM GENERATOR3 SOM GENERATOR3 BATTERY6 DRY CELL WITH 8 GGHT LAMP IMPORTED).9 SEWE LAMP (KURAZ)10
How long does it take to go there (the source of water indicated in Q14b), get water, and come back? (in minutes) LESS THAN 151 16-30	Out of which time spent for waiting. (in minutes) LESS THAN 151 16-302 31-453 46-604 61-905 91-1206	During the past month, how much did you pay for water, including any fees or costs of transportation, delivery, etc for this water?	Do you do anything to the water to make it safer to drink? REFERS TO THE WATER THEY ARE USING/DRINKING NOW. YES1 NO2	What do you do to make the water safe for drinking? BOIL1 ADD BLEACH/CHLORINE2 USE A WATER FILTER3 SOLAR ISINFECTION4 LET IT STAND AND SETTLE5	Does any member of the household (including the household head) own another building, dwelling, or house? EXCLUDING MAID/GUARDS	How many buildings and dwellings does the household own in total, including other houses owned? SUM UP ALL HOUSES OWNED BY HOUSEHOLD MEMBERS	What is the main Source household? IF THE RESPONSE TO TH SKIP TO Q21 ELECTRICITY ELECTRICITY ELECTRICITY SOLAR ENERGY BIO -GAS ELECTRICAL LANTERN LIGHT FROM I SWITCH KEROSENE LIL LOCAL KEROSE LIL LOCAL KEROSI CANDLE/WAX FIRE WOOD	HIS QUESTION IS CODE 5-13 / METER- PRIVATE1 / METER- SHARED2 / FROM GENERATOR3 19
How long does it take to go there (the source of water indicated in Q14b), get water, and come back? (in minutes) LESS THAN 151 16-30	Out of which time spent for waiting. (in minutes) LESS THAN 151 16-302 31-453 46-604 61-905 91-1206	During the past month, how much did you pay for water, including any fees or costs of transportation, delivery, etc for this water?	Do you do anything to the water to make it safer to drink? REFERS TO THE WATER THEY ARE USING/DRINKING NOW. YES1 NO2	What do you do to make the water safe for drinking? BOIL1 ADD BLEACH/CHLORINE2 2 USE A WATER FILTER3 SOLAR ISINFECTION4 LET IT STAND AND SETTLE5 OTHER,	Does any member of the household (including the household head) own another building, dwelling, or house? EXCLUDING MAID/GUARDS	How many buildings and dwellings does the household own in total, including other houses owned? SUM UP ALL HOUSES OWNED BY HOUSEHOLD MEMBERS	What is the main Source household? IF THE RESPONSE TO TH SKIP TO Q21 ELECTRICITY ELECTRICITY ELECTRICITY SOLAR ENERGY BIO -GAS ELECTRICAL LANTERN LIGHT FROM I SWITCH KEROSENE LIL LOCAL KEROSE LIL LOCAL KEROSI CANDLE/WAX FIRE WOOD	HIS QUESTION IS CODE 5-13 (METER- PRIVATE 1
How long does it take to go there (the source of water indicated in Q14b), get water, and come back? (in minutes) LESS THAN 151 16-30	Out of which time spent for waiting. (in minutes) LESS THAN 151 16-302 31-453 46-604 61-905 91-1206	During the past month, how much did you pay for water, including any fees or costs of transportation, delivery, etc for this water?	Do you do anything to the water to make it safer to drink? REFERS TO THE WATER THEY ARE USING/DRINKING NOW. YES1 NO2	What do you do to make the water safe for drinking? BOIL1 ADD BLEACH/CHLORINE2 2 USE A WATER FILTER3 SOLAR ISINFECTION4 LET IT STAND AND SETTLE5 OTHER,	Does any member of the household (including the household head) own another building, dwelling, or house? EXCLUDING MAID/GUARDS	How many buildings and dwellings does the household own in total, including other houses owned? SUM UP ALL HOUSES OWNED BY HOUSEHOLD MEMBERS	What is the main Source household? IF THE RESPONSE TO TH SKIP TO Q21 ELECTRICITY ELECTRICITY ELECTRICITY SOLAR ENERGY BIO -GAS ELECTRICAL LANTERN LIGHT FROM I SWITCH KEROSENE LIL LOCAL KEROSE LIL LOCAL KEROSI CANDLE/WAX FIRE WOOD	HIS QUESTION IS CODE 5-13 (METER- PRIVATE 1
How long does it take to go there (the source of water indicated in Q14b), get water, and come back? (in minutes) LESS THAN 151 16-30	Out of which time spent for waiting. (in minutes) LESS THAN 151 16-302 31-453 46-604 61-905 91-1206	During the past month, how much did you pay for water, including any fees or costs of transportation, delivery, etc for this water?	Do you do anything to the water to make it safer to drink? REFERS TO THE WATER THEY ARE USING/DRINKING NOW. YES1 NO2	What do you do to make the water safe for drinking? BOIL1 ADD BLEACH/CHLORINE2 2 USE A WATER FILTER3 SOLAR ISINFECTION4 LET IT STAND AND SETTLE5 OTHER,	Does any member of the household (including the household head) own another building, dwelling, or house? EXCLUDING MAID/GUARDS	How many buildings and dwellings does the household own in total, including other houses owned? SUM UP ALL HOUSES OWNED BY HOUSEHOLD MEMBERS	What is the main Source household? IF THE RESPONSE TO TH SKIP TO Q21 ELECTRICITY ELECTRICITY ELECTRICITY SOLAR ENERGY BIO -GAS ELECTRICAL LANTERN LIGHT FROM I SWITCH KEROSENE LIL LOCAL KEROSE LIL LOCAL KEROSI CANDLE/WAX FIRE WOOD	HIS QUESTION IS CODE 5-13 (METER- PRIVATE 1
How long does it take to go there (the source of water indicated in Q14b), get water, and come back? (in minutes) LESS THAN 151 16-30	Out of which time spent for waiting. (in minutes) LESS THAN 151 16-302 31-453 46-604 61-905 91-1206	During the past month, how much did you pay for water, including any fees or costs of transportation, delivery, etc for this water?	Do you do anything to the water to make it safer to drink? REFERS TO THE WATER THEY ARE USING/DRINKING NOW. YES1 NO2	What do you do to make the water safe for drinking? BOIL1 ADD BLEACH/CHLORINE2 2 USE A WATER FILTER3 SOLAR ISINFECTION4 LET IT STAND AND SETTLE5 OTHER,	Does any member of the household (including the household head) own another building, dwelling, or house? EXCLUDING MAID/GUARDS	How many buildings and dwellings does the household own in total, including other houses owned? SUM UP ALL HOUSES OWNED BY HOUSEHOLD MEMBERS	What is the main Source household? IF THE RESPONSE TO TH SKIP TO Q21 ELECTRICITY ELECTRICITY ELECTRICITY SOLAR ENERGY BIO -GAS ELECTRICAL LANTERN LIGHT FROM I SWITCH KEROSENE LIL LOCAL KEROSI CANDLE/WAX FIRE WOOD OTHER (SPEC	HIS QUESTION IS CODE 5-13 / METER- PRIVATE 1 / METER- SHARED 2 / FROM GENERATOR 3 / FROM GENERATOR 3 / S BATTERY 6 DRY CELL WITH 8 IGHT LAMP IMPORTED).9 SENE LAMP (KURAZ) 10 11 12
How long does it take to go there (the source of water indicated in Q14b), get water, and come back? (in minutes) LESS THAN 151 16-30	Out of which time spent for waiting. (in minutes) LESS THAN 151 16-302 31-453 46-604 61-905 91-1206	During the past month, how much did you pay for water, including any fees or costs of transportation, delivery, etc for this water?	Do you do anything to the water to make it safer to drink? REFERS TO THE WATER THEY ARE USING/DRINKING NOW. YES1 NO2	What do you do to make the water safe for drinking? BOIL1 ADD BLEACH/CHLORINE2 2 USE A WATER FILTER3 SOLAR ISINFECTION4 LET IT STAND AND SETTLE5 OTHER,	Does any member of the household (including the household head) own another building, dwelling, or house? EXCLUDING MAID/GUARDS	How many buildings and dwellings does the household own in total, including other houses owned? SUM UP ALL HOUSES OWNED BY HOUSEHOLD MEMBERS	What is the main Source household? IF THE RESPONSE TO TH SKIP TO Q21 ELECTRICITY ELECTRICITY ELECTRICITY SOLAR ENERGY BIO -GAS ELECTRICAL LANTERN LIGHT FROM I SWITCH KEROSENE LIL LOCAL KEROSI CANDLE/WAX FIRE WOOD OTHER (SPEC	HIS QUESTION IS CODE 5-13 (METER- PRIVATE 1
How long does it take to go there (the source of water indicated in Q14b), get water, and come back? (in minutes) LESS THAN 151 16-30	Out of which time spent for waiting. (in minutes) LESS THAN 151 16-302 31-453 46-604 61-905 91-1206	During the past month, how much did you pay for water, including any fees or costs of transportation, delivery, etc for this water? IF NONE, RECORD "0".	Do you do anything to the water to make it safer to drink? REFERS TO THE WATER THEY ARE USING/DRINKING NOW. YES1 NO2	What do you do to make the water safe for drinking? BOIL1 ADD BLEACH/CHLORINE2 2 USE A WATER FILTER3 SOLAR ISINFECTION4 LET IT STAND AND SETTLE5 OTHER,	Does any member of the household (including the household head) own another building, dwelling, or house? EXCLUDING MAID/GUARDS	How many buildings and dwellings does the household own in total, including other houses owned? SUM UP ALL HOUSES OWNED BY HOUSEHOLD MEMBERS	What is the main Source household? IF THE RESPONSE TO TH SKIP TO Q21 ELECTRICITY ELECTRICITY ELECTRICITY SOLAR ENERG BIO -GAS ELECTRICAL LANTERN KEROSENE LIL LOCAL KEROS CANDLE/WAX FIRE WOOD OTHER (SPEC	HIS QUESTION IS CODE 5-13 (METER- PRIVATE 1
How long does it take to go there (the source of water indicated in Q14b), get water, and come back? (in minutes) LESS THAN 151 16-30	Out of which time spent for waiting. (in minutes) LESS THAN 151 16-302 31-453 46-604 61-905 91-1206	During the past month, how much did you pay for water, including any fees or costs of transportation, delivery, etc for this water? IF NONE, RECORD "0".	Do you do anything to the water to make it safer to drink? REFERS TO THE WATER THEY ARE USING/DRINKING NOW. YES1 NO2	What do you do to make the water safe for drinking? BOIL1 ADD BLEACH/CHLORINE2 2 USE A WATER FILTER3 SOLAR ISINFECTION4 LET IT STAND AND SETTLE5 OTHER,	Does any member of the household (including the household head) own another building, dwelling, or house? EXCLUDING MAID/GUARDS	How many buildings and dwellings does the household own in total, including other houses owned? SUM UP ALL HOUSES OWNED BY HOUSEHOLD MEMBERS	What is the main Source household? IF THE RESPONSE TO TH SKIP TO Q21 ELECTRICITY ELECTRICITY ELECTRICITY SOLAR ENERG BIO -GAS ELECTRICAL LANTERN KEROSENE LIL LOCAL KEROS CANDLE/WAX FIRE WOOD OTHER (SPEC	HIS QUESTION IS CODE 5-13 (METER- PRIVATE 1

19b.	19c.	20.	20b.	21.	22.	23.
DELETED	On average, how much does the household spend on electricty each month? IF NONE, RECORD "0".	household faced electric power failure/interruption at least	,	What is the main source of cooking fuel? COLLECTING FIRE WOOD	your household own a cell phone or landline phone?	On average, how much does your household spend on cell phone/landline utilization per month? NOTE: UNIT OF TIME IS MONTH
	BIRR		HOURS			BIRR

SECTION 10: ASSETS

JECTION	10: ASSETS		1			
		1.	2.			
l T		How many of this [ITEM] does your household own?	LIST UP TO TWO ME			
E M		IF NONE RECORD 0 AND MOVE TO NEXT ITEM	HOUSEHOLD ROSTER			
C O D E	ITEM NAME	NUMBER OF ITEMS	HH ROSTER ID #1	HH ROSTER ID #2		
1	Kerosene stove					
2	Cylinder gasstove					
3	Electric stove					
4	Blanket/Gabi					
5	Mattress and/or Bed					
6	Wrist watch/clock					
7	Fixed line telephone					
8	Mobile Telephone					
9	Radio/ tape recorder					
10	Television					
11	CD/VCD/DVD/Video Deck					
12	Satelite Dish					
13	Sofa set					
14	Bicycle					
15	Motor cycle					
16	Cart (Hand pushed)					
17	Cart (animal drawn)- for transporting people and goods					
18	Sewing machine					

		1.	2.			
I T E M C O D	ITEM NAME	How many of this [ITEM] does your household own? IF NONE RECORD 0 AND MOVE TO NEXT ITEM NUMBER OF ITEMS	Who in the household owns the [ITEM LIST UP TO TWO MEMBERS FROM HOUSEHOLD ROSTER HH ROSTER ID #1 HH ROSTER ID #2			
19	Weaving equipment					
20	Mitad-Electric					
21	Energy saving stove (lakech, mirt etc)					
22	Refrigerator					
23	Private car					
24a	Jewels - Gold (in grams)					
24b	Jewels - Silver (in grams)					
25	Wardrobe					
26	Shelf for storing goods					
27	Biogas pit					
28	Water storage pit					
30	Sickle (Machid)					
31	Axe (Gejera)					
32	Pick Axe (Geso)					
33	Plough (Traditional)					
34	Plough (Modern)					
35	Water Pump					

SECTION 11A: NON-FARM ENTERPRISE

Over the past 12 months has anyone in this household 1 owned a non-agricultural business or provided a non-agricultural service from home or a household-owned shop, as a carwash owner, metal worker, mechanic, carpenter, tailor, barber, etc.?	YES1 NO2	6 driven a household-owned taxi or pick-up truck to provide transportation or moving services?	YES1 NO2
2 processed and sold any agricultural by-products, including flour, local beer (tella), 'areke", "enjera", seed, etc., but excluding livestock by-products, fresh/processed fish?		7 owned a bar or restaurant?	
3 owned a trading business on a street or in a market?		8owned any other non-agricultural business, even if it is a small business run from home or on a street?	
4 offered any service or sold anything on a street or in a market, including firewood, home-made charcoal, construction timber, woodpoles, traditional medicine, mats, bricks, cane furniture, weave baskets, thatch grass etc.?		8b. ENUMERATOR: DID THE HOUSEHOLD HAVE A NON-FARM ENTERPRISE IN WAVE 2? ${\rm YES1} \atop {\rm NO2}$	
5 owned a professional office or offered professional services from home as a doctor, accountant, lawyer, translator, private tutor, midwife, mason, etc?		9. ENUMERATOR: IS THERE A "1" FOR ANY OF THE QUESTIONS 1 THROUGH 8b? YES1 NO2 ►Section 11B, Q18	
INCLUDE HOUSEHOLD BUSINESS VENTURES THAT HAVE BEEN SHUT DOWN PERMANEN	ITLY OR TEMP	ORARILY DURING THE PAST 12 MONTHS.	

	1.			1a.	1b.	1c.	2.	3.		3b.	3c.
	What income generating enterprises did individuals in this household operate				Was this	Why was this enterprise	Where does this		ns/owned	Is the owner	Who from the
					enterprise	not in operation in the last	enterprise operate	this ente	rprise in	of this	household is
				in operation	12 months?	primarily?	the hous	ehold?	enterprise	providing the	
	FIRST LIST ALL NON-FARM ENTERPRISE, COPIED FROM				in the last	LEGAL PROBLEMS1					responses to
	QUESTIONNAIRE. THIS INCLUDES BUSINESSES THAT AI				12 months?	COULD NOT OBTAIN INPUTS2	HOME, INSIDE RESIDENCE1	LIST UP T		responses to	these
	OPERATING AND ANY THAT ARE NOW CLOSED. ALL EN					LACK OF DEMAND3 LOW PROFILE4	HOME, OUTSIDE	MEMBER		these	questions?
Ε	COPIED IN THE EXACT SEQUENCE LISTED IN THE WAVE	E 2 HH QUES	TIONNAIRE.			COULD NOT OBTAIN	RESIDENCE2 TRADITIONAL	HOUSEH	OLD	questions?	
N	ANY NEW NON-FARM ENTERPRISES SHOULD BE ADDE	ים דם דוור רג	ID AND			CREDIT5 TOO MUCH DEBT6	MARKET3	ROSTER			
Т	MUST GET A NEW ID.	D IO INE EN	ND AND			SECURITY ISSUES7	SHOP IN COMMERCIAL AREA4				
E	MOST GET A NEW ID.					OTHER (SPECIFY)8	ROADSIDE5				
R P							MOBILE6 RIVER/LAKES/				
R				YES1	YES1		PONDS7 CONSTRUCTION				
1				(▶Q2) NO2	(►Q2) NO2		SITES8 OTHER			YES1 (▶Q3D)	
S		SECTOR	R CODES	NO2	NO2	► NEXT ENTERPRISE,	(SPECIFY)9	FIRST	SECOND	NO2	
Е		320101	CODES			UNLESS LAST ENTERPRISE ► Q18		OWNER			
١.						LAST ENTERPRISE PQ16					ROSTER ID #
D	WRITTEN DESCRIPTION OF ACTIVITIES	PRIMARY CODE	SECONDARY CODE					ID	ID		
	WRITTEN DESCRIPTION OF ACTIVITIES	CODE	CODL								
1											
'											
2											
3											
4											
5											
6											
7											
8											
9											
10											

	3d.		4.		4b.	4c.	4d.	4e.		4f.
	Who in the h	ousehold	What were the two ma	ain sources of start-up		Did you eventually	In the last 12 months,	In the last 12 months,	what was the source	In the last 12 months,
	makes decisi	ons	capital for this enterpr	ise?	did you try to get	get the credit from	did you get any credit	of credit that has been	used to operate this	how much have you
	regarding the	e earnings			credit for this	the banks OR other	to operate this	enterprise?		borrowed for this
	from this ent	terprise?	AGRICULTURAL INCOME1 NON-FARM SELF-EMPLOYMENT		enterprise from	formal financial	enterprise ?			enterprise?
			INCOME	2	banks and other	agencies for this				
	LIST UP TO 2		WAGE OR SALARY IN REMITTANCES		formal financial	enterprise?				
Ε	FROM HOUS	EHOLD	SALE OF ASSETS	5	agencies?			LOAN FROM BANK (CO		
N	ROSTER		BANK OR COOPERATI FAMILY OR FRIENDS					MICRO FINANCE, CRE MONEY LENDER		
Т			COMMUNITY	7				OTHER LOANS		
Ε			PRIVATE MONEYLEND MICRO CREDIT AND	ERS8 SAVINGS				COOPERATIVE/ TRADE ASSOCIATIONS	4	
R			INSTITUTIONS	9				RELATIVES/FRIENDS. OTHER (SPECIFY)		
P			OTHER (SPECIFY)					OTHER (SPECIFI)		
R					YES1 NO2	YES1 NO2	YES1 NO2			
S					(►Q4d)	11011111112	(►Q4g)			
E							(3, 3)			
-	ROSTER ID	ROSTER ID							ı	
I D	#1	#2	PRIMARY	SECONDARY				1ST SOURCE	2ND SOURCE	BIRR
D										
1										
ı'										
2										
3										
4										
5										
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7										
<u> </u>										
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	4g.	4h.	5.		6.		7.	8.			9.	10.	11.
	In the last 12 months,			did this	To whom does/	did this	Are the		st 12 months,	in which	During the	In those months	How many hired
	did the enterprise	months, what is	enterpr	ise start	enterprise most	ly sell its	activities of	months was e	enterprise acti	se activity highest? last		when operating,	workers did this
	have any loans that it	the amount	opera	ating?	products?		this				months of	what is the average	enterprise
	was repaying (in cash	repaid on loans					enterprise	RANK IN ORD	ER OF IMPOR	TANCE	operation, number of days pe		employ in the
	or kind)?	for the		BER1			seasonal?				how many	ow many month in which the	
		enterprise?	OCTOBE NOVEMB								months was	enterprise	the enterprise
Е			DECEMB	ER4				SEPTEMBER		7	this enterprise	operates?	was operating?
N			JANUAR FEBRUA	Y5 RY6	LOCAL CONSU	MEDIC OD		OCTOBER NOVEMBER.		8	active?		
Т			MARCH.	7	PASSERS-BY.	1		DECEMBER.	4 JUNE.	10			EXCLUDE
Е				8	MARKET TRADERS			JANUARY FEBRUARY.	, 0011.	11 T12			MEMBERS OF
R			JUNE	10	COOPERATIVES	34				E13			THE
Р			JULY AUGUST	12	NGOS GOVERNMENT.								HOUSEHOLD
R			PAGUME		OTHER (SPEC								
-1	YES1												
S	NO2						YES1						
Ε	(► Q5)						NO2	MONTH	MONTH	MONTH		AVERAGE NUMBER	
				4 DIGIT			(▶ Q9)				NUMBER OF	OF DAYS PER	NUMBER
D		BIRR	MONTH	EC YEAR	RESPONSE 1	RESPONSE 2		1st	2nd	3rd	MONTHS	MONTH	
						l l						l .	1
1													
2													
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9													
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10													
10													
Щ.						l			l				

	12.						13.	14.					15.
E N T							During the months the enterprise was	During the months the enterprise was operating in the last 12 months, what were average monthly operating costs (including stocks and hired labour)?					Over the past 12 months, what share of total household cash income came from this enterprise?
E R P R I S	_						BIRR			ABOUT 25%2 ABOUT HALF3 ABOUT 75%4 ALMOST ALL5			
E		PAID			UNPAID		BIRR		PURCHASE OF			ALL OTHER	
D	ROSTER ID		WAGES	GOODS FOR SALE	RAW MATERIALS	TRANSPORTATION	OPERATING COSTS						
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													

	16.			17.
E N T E R P R I S	to non-farm growth?	st important business oper onstraint CC RIGHT	ations and	Does the enterprise have a license?
E I D	1st	2nd	3rd	YES1 NO2
1				
2				
3				
4				
5				
6				
7				
8				
9				
10			_	

18.	19.		
Is any member of this household planning to open a non-farm enterprise in the next 12 months?	constraints members f	hree prima s preventing from openir prise.	g HH
YES1 NO2	_	CONSTRAII N THE RIGH	
	1st	2nd	3rd

Codes for Q16 & 19 CONSTRAINTS ELECTRICITY 11 = Access 12 = Quality 13 = Cost TELECOMMUNICATIONS 21 = Access 22 = Quality 23 = Cost WATER 31 = Access 32 = Quality 33 = Cost POSTAL SERVICES 41 = Access 42 = Quality 43 = Cost TRANSPORTATION 61 = Road access 62 = Road quality 63 = Cost 64 = Facilities to transport goods FINANCIAL SERVICES 71 = Difficulty to borrow from family, friends or others 72 = Difficulty to borrow from formal financial institutions 73 = High interest rates 74 = Complicated bank loan procedures (too many forms or not correct documentation) 75= Fear of not being able to pay loan installments 76= Don't know where or how to get a loan

Codes for Q16 & 19 (continued) MARKETS 81 = Access to markets (distance and cost) 82 = Difficult to obtain information on your product's market 83 = Low demand for goods and services produced GOVERNMENT 91 = Corruption 92 = Uncertain economic policy 93 = Restrictive laws and regulations SAFETY 101 = Criminality, theft and lawlessness 102 = Conflicts and social friction TECHNOLOGY 111 = Lack of training 112= Research costs 113 = Access to computers 114 = Access to information and technology REGISTRATION AND PERMITS 121 = Time and cost of registering enterprise 122 = Time and cost of obtaining enterprise permits 123 = Complicated enterprise registration and permit regulations TAXATION 131 = High taxes 132 = Unofficial levies OTHER 140 = Other (specify)

SECTION 12: OTHER INCOME

SEC	TION 12: OTHER INCOME								
		1.	2.	3.		4.			5.
		_		Who in you	r	How much	-	-	How was this payment
			did your household	household		from rural,	/urban/in	ternational	made to you?
Ϊ́τ		any members of	receive in total during			locations?			
E		your household	the last 12 months?	do with the	•				CACIL
М		receive any [SOURCE]?	ESTIMATE THE CASH	from [SOUR	(CEJ?				CASH1 THROUGH A FORMAL
С		[SOURCE]?	VALUE OF IN-KIND	LIST UP TO	2 EROM				ACCOUNT (LIKE A BANK/MFI/SACCO)2
0			TRANSFERS RECEIVED			FROM	FROM	FROM	THROUGH MOBILE
D E		VDQ 1		HH	HH	RURAL	URBAN	OTHER	BANKING SERVICES.3 THROUGH REGULATED
-		YES.1 NO2		ROSTER	ROSTER	AREAS	AREAS	COUNTRIES	MONEY TRANSFER
		► NEXT SOURCE		ID CODE	ID CODE				SERVICE4 Others5
	SOURCE		BIRR	# 1	# 2	BIRR	BIRR	BIRR	00.10101111110
	Incoming Transfers/Gifts								
101	Cash Transfers/Gifts from Individuals (Friends/Relatives)								
102	Food Transfers/Gifts from Individuals (Friends/Relatives)								
103	Non-Food In-Kind Transfers/Gifts from Individuals (Friends/Relatives)								
	(Friends/Relatives)								
	Pension & Investment Income	Ī		1	1	7			
104	Interest or Other Investment Income								
105	Pension Income								
	Rental Income								
	Income from Shop/Store/ House/ Rental/ Car, Truck, Other								
106	Vehicle Rental (DO NOT INCLUDE ANY NON-FARM								
	ENTERPRISE INCOME)]			
107	Income from land rental								
108	Income from renting agricultural tools								
109	Income from renting transport animals								
	Revenue from Sales of Assets					_			
110	Income from Real Estate Sales								
111	Income from Household Non-Agricultural Asset Sales	_							
112	Income from Household Agricultural/Fishing Asset Sales]			
	Other Income					-			
113	Inheritance/ Lottery/Gambling Winnings								
									-

SECTION 13: ASSISTANCE

				1	1						
1.		2.		3.	3b.	4.	5.	6.	7.		
Did you or members of your household		What is the name of the		How much cash did	How was the cash payment	What was the value	What was the	Was this aid given to	Which	nembe	rs of
receive any [] in the past 12 months		organization/program who provided	this	your household	made to your household?	of food the	value of any	the entire household	the hou	sehold	Į.
from the government or a non-		assistance?		receive from this		household received	other in-kind	or given to specific	particip	ated in	this
governmental institution (such as		GOVERNMENT	1	organization in the	CASH1	from this	assistance	persons in the	progran	n?	
church)?		INTERNATIONAL NGO	.2	last 12 months?	THROUGH A FORMAL ACCOUNT	organization in the	received in the	household?	l 1	JST UP	то
		LOCAL NGOOTHER		IF NONE RECORD	(LIKE A	last 12 months?	last 12 months?			3	
EXCLUDE SELF-HELP GROUPS AND		OTHER.	• •	"0" AND SKIP TO Q4	BANK/MFI/SACCO)2 THROUGH MOBILE BANKING	IF NONE RECORD	IF NONE	ENTIRE HH1			
FRIENDS	YES1 NO2			†	SERVICES3	"0"	RECORD "0"	► NEXT ITEM	но	USEHO	LD
	NO2 ► NEXT				THROUGH REGULATED MONEY TRANSFER SERVICE4			TO A PERSON2	RC	STER II	D
	ITEM	SPECIFIC NAME	CODE	BIRR	TRANSFER SERVICE4	BIRR	BIRR		1	2	3
PSNP (note: do not include PSNP											
A. labour activites)											
Other assistance (not PSNP):											
B. Free food											
Food-for-work programme or cash-											
for-work programme											
D. Inputs-for work programme											
Other assistance (not listed above),											
E. specify:											
			1			ĺ			ĺ		1 7

SECTION 14: CREDIT

[ASK OF HOUSEHOLD HEAD]

1.	Over the past 12 months, did you or anyone else in this household borrow greater than 150 birr on credit fro	m someone out	utside the household or from an institution for business or farming purposes, receiving either
	cash or inputs?		YES1 NO2 ▶09

	2.	2. 3.			4. 5.		5b.	6.	7.		8.				
L	Fi	rom whom did you or		Which housel	nold member	What was the main	When was the loan		How often did you	Has the loan	Approximately when is		How much was paid (or expect to pay) in		pay) in
0	aı	nyone else in your		was responsib	ole for the	or the reason for obtaining		hin the past	repay the loan?	been re-paid?	the loan expected to be		total when the loan is paid off?		
Α	h	ousehold borrow on		loan?		the loan? Was it:	12 months?				paid back?				
Ν	CI	redit money for business				[READ CODES ON NEXT	AD CODES ON NEXT Daily		Daily1				(THEN ► NEXT LOAN.		
N O	LI G	r farming over the past 2 months? IST ALL NAMES BEFORE OING TO THE NEXT LUESTION.		LIST UP TO 2 F HOUSEHOLD		PAGE] SEPTEMBER 1 OCTOBER 2 NOVEMBER 3 DECEMBER 4 JANUARY 5 FEBRUARY 6 MARCH 7 APRIL . 8 MAY 9 JUNE 10 JULY 11 AUGUST 12 DACKIMP 13		Weekly2 Monthly3 Every three months4 Every six months5 Annually6 1 time lump sum7 only when I get cash8	YES1 (▶Q8) NO2	SEPTEMBER. 1 OCTOBER. 2 NOVEMBER. 3 DECEMBER. 4 JANUARY. 5 FEBRUARY. 6 MARCH. 7 APRIL 8 MAY. 9 JUNE. 10 JULY. 11 AUGUST. 12 PAGUME. 13		WHEN ALL LOANS DONE, ▶Q9)			
														BIRR	
			CODE	HH ROSTER ID CODE # 1	HH ROSTER ID CODE # 2		MONTH	4 DIGIT EC			MONTH	4 DIGIT EC	PRINCIPAL	INTEREST	TOTAL
				ID CODE # 1	ID CODE # 2		MONTH	YEAR			MONTH	YEAR	PRINCIPAL	INTEREST	TOTAL
1															
2															
3															
4															
5															
6															

9.	10.	11.	12.	13.	14.	15.	16.	
During the last 12	Who turned down this	What was main	Is anyone in the	From whom or which	What was main reason for	ENUMERATOR:	Why did no one in the household	
months, did	request?	reason for trying	household	institution was the	trying to obtain the loan?	WAS THE ANSWER	attempt to borrow in the last 12	
anyone in the	LIST UP TO 2.	to obtain the	awaiting word	application made for a	Was it: [READ RESPONSES]	TO QUESTIONS 1, 9	months? [LIST UP TO TWO ANSWERS	
household try to		loan? Was it:	on a loan that	loan?		AND 12 BOTH	ORDER OF IMPORTANCE.]	
borrow from	USE CODES BELOW	[READ	was applied for	LIST UP TO 2.	USE CODES BELOW.	"NO"?		
someone outside		RESPONSES]	during the last					
the household or			12 months?	USE CODES BELOW		ANSWER TO All	NO FARM OR BUSINES	
from an insti-tution		USE CODES				THREE	HAVE ADEQUATE BELIEVED WOULD BE	2
and were turned		BELOW				QUESTIONS	REFUSED	
down?						"NO"1	TOO EXPENSIVE	
			YES1				TOO MUCH TROUBLE FOR WHAT IT IS WORTH	
			NO2			ANSWER TO ANY	INADEQUATE COLLATE	RAL6
			(►Q15)			ONE OF THESE	DO NOT LIKE TO BE IN DEBT	7
YES1 NO2						THREE QUESTIONS	DO NOT KNOW ANY LE	
(►Q12)						IS	FEAR NOT BE ABLE T OTHER (SPECIFY)	
						"YES"2▶ NEXT	(
						SECTION		
	1ST 2ND	†		1ST 2ND			1ST	2ND
		1	l			<u> </u>		

CODES FOR Q2, Q10& Q13:

RELATIVE1	RELIGIOUS	00225
NEIGHBOUR	INSTITUTION	PURCHA BUSINI PURCHA FOR FO PURCHA

CODES FOR Q4, Q11,& Q14:

URCHASE	HOUSE/LEASE LAND	FOR	BU
BUSINESS	/FARMING1		UF
URCHASE	AGRICULTURAL INPUTS		EX
OR FOOD	CROP	.2	PU
URCHASE	INPUTS		F#

FOR OTHER CROPS3
BUSINESS START-
UP CAPITAL4
EXPANDING BUSINESS5
PURCHASE NON-
FARM INPUTS6
OTHER (SPECIFY)7

SECTION 15: CONTACT INFORMATION

1. In or	der for us to be able to co	ntact the household in the future,	could you kindly provi	de us with telephone numbe	ers?	
PHONE	NUMBER FOR HOUSEHOL	D HEAD:	LANI	DLINE	CELL	
1A	NAME :		PHONE :			
	ase we are not able to mak usehold ?	se contact with the household hea	ad, could you kindly pro	vide us with the telephone	numbers of some other adult members of	
PHONE	NUMBERS FOR OTHER HO	DUSEHOLD MEMBERS:				
2A.	NAME :	·····	ID (FROM ROSTE	R)	PHONE :	
2B.	NAME :		ID (FROM ROSTE	R)	PHONE :	
2C.	NAME :		ID (FROM ROSTE	R)	PHONE :	
3. If yo	u were to move in the nex	t two years, who are the people in	n this village/town/city	who would be most likely to	know your new address?	
CONTA	CT INFORMATION FOR RE	FERENCE PERSON 1		CONTACT INFORMATI	ON FOR REFERENCE PERSON 2	
3A1.	NAME	:	3B1.	NAME	:	
3A2.	RELATION TO HEAD	:	3B2.	RELATION TO HEAD	:	
3A3.	PHONE (LANDLINE)	:	3B3.	PHONE (LANDLINE)	:	
3A4.	PHONE (CELL)	:	3B4.	PHONE (CELL)	:	
3A5.	VILLAGE NAME		3B5.	A VILLAGE NAME		
					<u></u>	

SECTION 1: HOUSEHOLD ROSTER

ENUMERATOR: REFER TO THE COVER SECTION, Q12a.

FOR ALL HOUSEHOLD WITH COMPLETED AGRICULTURE QUESTIONNAIRE, PREFILL ALL HOUSEHOLD MEMBERS FROM AGRICULTURE QUESTIONNAIRE (POST-PLANTING QUESTIONNAIRE). FOR HOUSEHOLDS FROM BIG URBAN HOUSEHOLDS PLEASE PREFILL HOUSEHOLD MEMBERS FROM THE PRINTOUT LISTS

	1.	2.	3.	4.	4b.
1	NAME	What is [NAME]'s	What is the	How old is [NAME]	Is [NAME] a
N		relationship to the head of	sex of	(COMPLETED YEAR)?	new member
D	• 1	household?	[NAME]?	IF RESPONDENT	of this
1	COPIED FROM AGRICULTURE			DOESN'T KNOW, USE	household?
v	QUESTIONNAIRE (FROM POST-	HEAD		YEAR OF BIRTH TO	
ľ	PLANTING QUESTIONNAIRE). FOR HOUSEHOLDS FROM BIG URBAN			CALCULATE AGE OR USE	
D	SAMPLE LIST ALL HOUSEHOLD			MAJOR EVENTS LISTED	
	MEMBERS FROM PRINTED LISTS	SISTER/BROTHER6		IN ENUMERATOR	
U	OF WAVE 2 MEMBERS	NIECE/NEPHEW7 UNCLE/AUNT8		MANUAL TO PROMPT	
Α	ALL MEMBERS MUST BE COPIED	SON/DAUGHTER IN-		RESPONDENT.	
L	IN THE EXACT SEQUENCE LISTED	LAW9 FATHER/MOTHER IN-			
	IN THE PP OR LIVESTOCK ROSTER.	LAW10	MALE1	(If 9 years and over give	
1		BROTHER/SISTER IN- LAW11	FEMALE2	YEARS only. If less than 9 years in age give YEARS	
D	ANY NEW HOUSEHOLD MEMBERS	GRANDPARENTS12		and MONTHS. If less than	
	SHOULD BE ADDED TO THE END	OTHER RELATIVES13		one month put "0")	YES1 (▶Q5)
	AND MUST GET A NEW ID.	SERVANT14		, ,	NO2
				YEARS MONTHS	
				TEARS MONTHS	
1	I				
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
12					

EDUCATION CODES (SECTION 2, QUESTIONS 5 AND 8)
-
BASED ON BOTH CURRICULUMS
KINDERGARTEN, O GRADE, NURSERY, OR 1ST GRADE
1ST GRADE
2ND GRADE
3RD GRADE
4TH GRADE
5TH GRADE
6TH GRADE
7TH GRADE
8TH GRADE
BASED ON PREVIUOS CURRICULUM
9TH GRADE
10TH GRADE
11TH GRADE
12TH GRADE
12TH GRADE + 1 (CERTIFICATE)
TEACHER TRAINING CERTIFICATE
1ST YEAR COLLEGE
2ND YEAR COLLEGE
DIPLOMA
3RD YEAR COLLEGE
BACHELOR'S DEGREE PROGRAM (INCLUDING M.D.)
POSTGRADUATE DIPLOMA (M.A., PHD, MPHIL, ETC.)20
FOSIGNADUATE DIFLOMA (M.A., FRD, MERIL, EIC.)
BASED ON NEW CURRICULUM
9TH GRADE
10TH GRADE
11TH GRADE
12TH GRADE
CERTIFICATE (10+1) VOCATIONAL AND TECHNICAL COURSE
LEVEL 2 VOCATIONAL AND TECHNICAL COURSE
CERTIFICATE (10+2) VOCATIONAL AND TECHNICAL COURSE
1 YEAR IN 10+3 OR LEVEL 3 VOCATIONAL AND TECHNICAL COURSE
2 YEARS IN 10+3 OR LEVEL 3 VOCATIONAL AND TECHNICAL COURSE29
DIPLOMA IN 10+3 OR LEVEL 3 VOCATIONAL AND TECHNICAL COURSE30
1ST YEAR COLLEGE
2ND YEAR COLLEGE
3RD YEAR COLLEEGE
BACHELOR'S DEGREE
ABOVE BACHELOR'S (M.A., PHD, ETC.)
INFORMAL EDUCATION (CAN READ AND WRITE BUT HAS NEVER BEEN IN
REGULAR SCHOOL)93
ADULT LITERACY PROGRAM94
SATELLITE
NON-REGULAR (CAN READ AND WRITE BY ATTENDING A RELIGIOUS INSTITUTE SUCH
AS KES OR KURAN BUT NEVER ATTENDED REGULAR SCHOOL)96
NOT EDUCATED98
DON'T KNOW99

OCCUPATION AND INDUSTRY CODES

Occupation Code

- 01. Legislators, Senior Government Officials and Managers
- 02. Professionals/ Physical, Mathematical and Engineering Science Professionals
- 03. Technicians and Associate Professionals/ Physical and Engineering Science Associate Professionals.
- 04. Clerks, Office clerks
- 05. Service Workers and Shop and Market Sales Workers/ Personal and Protective Service workers, Travel attendants and related workers
- 06. Skilled Agricultural and Fishery Workers Market-Oriented Skilled Agricultural and Fishery Workers
- 07. Craft And Related Trades Workers, Extraction and Building Trades Workers
- 08. Plant and Machine Operators and Assemblers, Stationary-Plant and Related Operators
- 09. Elementary Occupations, Sales And Services Elementary Occupations
- 10. Army/ Member of the Armed Forces

Industry Code

- 01. Agriculture, (Hunting, Forestry and Production of Related Products and Services)
- 02. Fishing, Fish Farms and Service Activities Incidental to Fishing
- 03. Mining and Quarrying
- 04. Manufacturing (For example Manufacturing of Food Products Including Processing, Caning and Preserving. Weaving, blacksmith etc)
- 05. Electricity, Gas, Steam and Hot Water Supply
- 06. Construction, (contractor, Site Preparation, Land Clearing, building/home construction)
- 07. Trade (Wholesale and Retail Trade)
- 08. Hotels and Restaurants/ Hotels (With Hotel Rooms); Camping Sites and Other Provision of Short-Stay Accommodation
- 09. Transport, Storage and Communications/ Land Transport People and Merchandise
- 10. Financial Intermediation (Except Insurance and Pension Funding)
- 11. Real Estate, Renting and Business Activities)
- 12. Public Administration and Defence
- 13. Education
- 14. Health and Social Work
- 15. Other Services
- 16. Private Households with Employed Persons
- 17. Extra-Territorial Organizations and Bodies including International Organizations and NGOs