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Two Stylized Housing Questionnaires

by

Stephen Malpezzi[†]

with the assistance of Suzanne Loux

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[†]Center for Urban Land Economics Research
Grainger 5275, The School of Business
The University of Wisconsin
975 University Drive
Madison, Wisconsin 53706 USA
SMALPEZZI@BUS.WISC.EDU

Stephen Malpezzi is on the faculty of the Department of Real Estate and Urban Land Economics, the University of Wisconsin-Madison.

Over the past 15 years I have been involved in the design of housing market studies in a number of (mostly developing) countries. Often it has been extremely useful to design, field and analyze a household survey focusing on housing and related economic and demographic information.

In 1985, with the assistance of Sue Loux, I designed a stylized questionnaire. From time to time I get requests for this model questionnaire, so I have published it as a CULER Working Paper. Actually there are two versions, long and short, contained herein. The long version, in particular, is much longer than is practical. But I drafted a long one because it's easier to cut questions out than to think of the question you forgot to include.

Of course it goes without saying that neither instrument can be used without extensive modification to adapt it to local conditions. General models for the kinds of housing market and policy analysis mentioned above include:

Angel, Shlomo *et al.* *The Land and Housing Markets of Bangkok: Strategies for Public Sector Participation*. PADCO, Thailand National Housing Authority, and ADB; 1986.

Cameroon, Republic of. *Housing in Cameroon: Evaluation of the Real Housing Needs in Cameroon, Indicators for the National Housing Policy, Strategies Towards a National Housing Policy*. Yaounde, Cameroon: Ministry of Town Planning and Housing, 1990.

Hannah, Lawrence, Alain Bertaud, Stephen Malpezzi and Stephen Mayo. *Malaysia: The Housing Sector; Getting the Incentives Right*. World Bank Sector Report No. 7292-MA, 1989.

Korea Research Institute for Human Settlement. *A Study on Housing Problems and Policy Development in Korea*. October 1985.

Mayo, Stephen K., with others. *Informal Housing in Egypt*. Abt Associates, 1982.

Struyk, Raymond J., Michael Hoffman, Harold M. Katsura, Armida S. Alisjahbana, Genevieve Kenney, Douglas Page, Robert Rerimassie and Mirza Siregar. *Indonesia Housing Policy Studies Project Final Report*. The Urban Institute and Hasfarm Dian Consultan, UI Paper 3780-23, 1989.

World Bank. *Ghana Housing Sector Review*. Report No. 8099-GH, 1990.

References on how to design and field a survey include:

Backstrom, Charles H. and Gerald Hursh-Cesar. *Survey Research*. Wiley, 1981.

Converse, Jean and Stanley Presser. *Survey Questions: Handcrafting the Stylized Questionnaire*. Sage, 1986.

Fink, Arlene and Jacqueline Kosecoff. *How to Conduct Surveys: A Step by Step Guide*. Sage, 1985.

Kish, Leslie. *Survey Sampling*. Wiley, 1965.

Lansing, John B. and James N. Morgan. *Economic Survey Methods*. University of Michigan, Institute for Social Research, 1971.

Snedecor, George and William Cochran. *Statistical Methods*. Ames, Iowa: Iowa State University Press, 1967.

Methods of analysis are discussed in:

Bertaud, Alain, Marie-Agnes Bertaud and James Wright. *Efficiency in Land Use and Infrastructure Design: An Application of the Bertaud Model*. World Bank, INU Discussion Paper, 1988.

Dowall, David. *The Land Market Assessment: A New Tool for Urban Management*. Jointly published by the United Nations Development Program, The World Bank, and the United Nations Centre for Human Settlements (Habitat), 1991.

Malpezzi, Stephen. *Analyzing an Urban Housing Survey*. World Bank: Infrastructure and Urban Development Department Discussion Paper No. UDD-52, 1984.

Malpezzi, Stephen. *Analyzing Incentives in Housing Programs: Evaluating Costs and Benefits with a Present Value Model*. INU Discussion Paper No. 23, 1988.

Malpezzi, Stephen. *Notes on Consumer's Surplus*. University of Wisconsin, Processed, 1993.

Malpezzi, Stephen and Stephen K. Mayo (with David J. Gross). *Housing Demand In Developing Countries*. World Bank Staff Working Paper No. 733, 1985.

Malpezzi, Stephen, Graham Tipple and Kenneth Willis. *Costs and Benefits of Rent Control: A Case Study in Kumasi, Ghana*. World Bank Discussion Paper No. 74, 1990.

Malpezzi, Stephen, Michael Bamberger and Stephen K. Mayo. *Planning an Urban Housing Survey*. World Bank: Infrastructure and Urban Development Department Discussion Paper No. UDD-42, 1982.

Malpezzi, Stephen, Stephen K. Mayo, Ricardo Silveira and Carmela Quintos. *Measuring the Costs and Benefits of Rent Control: Case Study Design*. INU Discussion Paper No. 24, 1988.

Renaud, Bertrand. *Housing and Financial Institutions in Developing Countries*. World Bank Staff Working Paper No. 658, 1984.

Tipple, A. Graham and Kenneth G. Willis (eds.). *Housing the Poor in the Developing World: Methods of Analysis, Case Studies and Policy*. London: Routledge, 1991.

United Nations Centre for Human Settlements, and the World Bank. *The Housing Indicators Program -- Volume I: Report of the Executive Director*. Nairobi, 1993.

United Nations Centre for Human Settlements, and the World Bank. *The Housing Indicators Program -- Volume II: Indicator Tables*. Nairobi, 1993.

United Nations Centre for Human Settlements, and the World Bank. *The Housing Indicators Program -- Volume III: Preliminary Findings*. Nairobi, 1993.

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World Bank. *Housing: Enabling Markets to Work*. World Bank Policy Paper, 1993.

Comments and criticisms of the instrument are always welcome.

SHORT HOUSING QUESTIONNAIRE

HOUSING SURVEY

I. CLASSIFICATION DATA

1. Questionnaire number (precoded): _____
2. Household ID: _____
3. Address: _____
4. Sample enumeration district: _____
5. Census tract: _____
6. Urban/Rural..... URBAN 1
RURAL 2
7. City/Suburb..... CITY 1
SUBURB 2
N/A 9
8. Date of Interview: _____
9. Time of interview: _____ am/pm
10. Interviewer's name: _____
11. Supervisor's code: _____

II. DWELLING UNIT INTERVIEWER OBSERVATIONAL DATA

12. Type of structure..... DETACHED HOUSE 1

ATTACHED HOUSE OR DUPLEX 2

APARTMENT OR FLAT 3

SPECIFY "OTHER": _____ SEPARATE ROOM 4

_____ TENT OR LEAN-TO 5

_____ OTHER (SPECIFY) 6

13. Wall material (exterior)..... MUD 1

MUD AND CEMENT 2

STONE 3

BLOCKS 4

BRICKS 5

SPECIFY "OTHER": _____ PLASTER 6

_____ WOOD 7

_____ OTHER (SPECIFY) 8

14. Roof material..... THATCH 1

CORRUGATED IRON 2

ASBESTOS 3

TILES 4

TIN 5

CONCRETE 6

SPECIFY "OTHER": _____ ASPHALT 7

_____ WOOD 8

_____ OTHER (SPECIFY) 9

III. VACANT UNIT

15. Respondent :..... LANDLORD 1
 SPECIFY "OTHER": _____ REAL ESTATE AGENT 2
 _____ NEIGHBOR 3
 _____ OTHER (SPECIFY) 4
16. Is this unit intended for year-round use, seasonal use, or use by temporary workers? YEAR-ROUND 1
 SEASONAL 2
 EXPLAIN CODES "4" OR "5": _____ TEMPORARY 3
 _____ OTHER HOUSING UNIT 4
 _____ NOT A HOUSING UNIT 5
17. Is this unit for rent, for sale, rented but not occupied, sold but not occupied, held for occasional use, or something else? VACANT FOR RENT 1
 VACANT FOR SALE 2
 VACANT FOR RENT OR SALE 3
 SPECIFY "OTHER": _____ RENTED/NOT OCCUPIED 4
 _____ SOLD/NOT OCCUPIED 5
 _____ OCCASIONAL USE 6
 OTHER (SPECIFY) 7

V. HOUSEHOLD COMPOSITION

These next questions are about you and the members of your household.

1. First, could you tell me the names of all the members of your household who live here?
Let's start with the head of the household. RECORD EACH HOUSEHOLD MEMBER'S NAME; THEN ASK FOR EACH:

2. FOR OTHER THAN HEAD: What is (NAME's) relationship to head of the household?

01 HEAD	03 SON OF HEAD	05 FATHER	07 BROTHER	09 UNCLE	11 COUSIN	13 NOT RELATED
02 WIFE	04 DAUGHTER	06 MOTHER	08 SISTER	10 AUNT	12 OTHER RELATIVE	

3. How old is (NAME)? RECORD AGE.

4. (IF NOT CLEAR) Is (NAME) male or female? 1 MALE 2 FEMALE

5. What is his/her marital status?

1 SINGLE	3 WIDOWED	5 SEPARATED
2 MARRIED	4 DIVORCED	

6. Is (NAME) now attending school? IF YES: Is that a public or private school?

1 YES, PUBLIC	2 YES, PRIVATE	3 NOT ATTENDING
---------------	----------------	-----------------

7. What is the highest grade of school that he/she has completed? RECORD GRADE NUMBER.

ATTEND COLLEGE = 13	ILLITERATE = 98
COLLEGE GRADUATE = 16	READ & WRITE = 97
GRADUATE SCHOOL = 18	

8. Last month, was he/she working, looking for work, attending school or doing something else?

1 WORKING

4 OTHER: SPECIFY LINE NUMBER AND ACTIVITY: _____

2 LOOKING FOR WORK _____

3 ATTENDING SCHOOL _____

9. IF WORKING: What kind of work is (NAME) doing? _____

10. IF WORKING: And about how many hours does he/she work each week? _____

11. Does (NAME) contribute some income to help support this household? 1 YES 2 NO

12. How long has he/she been living here? RECORD NUMBER OF YEARS.

13. ASK RESPONDENT ONLY: What tribe/caste/ethnic group does (NAME) belong to? _____

CODE RESPONSES TO Q. (1) THROUGH (12) FOR EACH HOUSEHOLD MEMBER:

	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
	NAME	RELATIONSHIP TO HEAD OF HOUSEHOLD	AGE	SEX	MARITAL STATUS	ATTENDING SCHOOL OR COLLEGE	HIGHEST GRADE REACHED	ECONOMIC ACTIVITY LAST MONTH	TYPE OF WORK	NUMBER OF HOURS	HOUSEHOLD INCOME CONTRIBUTOR	HOW LONG LIVING (HERE)
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												

31. Line number of respondent: _____

32. Line number of household head: _____

14. How many other households live here?.....

IF NONE, SKIP TO NEXT PAGE.

15. For how many years have they lived here?.....

16. (In total) How many household members do they have?....

VII. CHARACTERISTICS OF THE DWELLING

1. INTERVIEWER OBSERVATION: PRIMARY FLOOR MATERIAL

EARTH	1
WOOD	2
STONE	3
TILE	4
BRICK	5
CONCRETE/CEMENT	6
OTHER/SPECIFY	7

These next questions are about your home.

2. Do you know when this (building/house) was built?

IF NOT SURE: What would be your best estimate?

RECORD YEAR.....

3. IF NOT A SINGLE FAMILY BUILDING: How many dwelling units (including your own), are there in this building?.....

4. What is the approximate area of this dwelling unit (in square meters?.....

EXPLAIN TOTAL AREA: _____

5. How many floors are there in this dwelling unit?.....

6. How many rooms do you have in this dwelling unit?..... DEFINE ROOMS.

7. Is your dwelling unit used only for residence, or is it also used for business?

RESIDENCE ONLY	1
RESIDENCE/BUSINESS	2

IF RESIDENCE ONLY, SKIP TO Q. 9.

8. How many rooms are used for business?.....

9. (And) how many rooms are used for sleeping?.....

10. How many complete bathrooms do you have here?

By "complete" I mean _____

VIII. HOUSING SERVICES

1. Does this unit have electricity?..... YES NO
1 2
2. What kind of lighting do you have here--
electricity, oil or gas, or what?..... ELECTRICITY 1
OIL LAMP 2
GAS 3
OTHER 4
3. Is your kitchen inside or outside?..... INSIDE 1
OUTSIDE 2
NONE 3
4. Do you share it or have exclusive use?..... SHARE 1
EXCLUSIVE USE 2
5. What kind of fuel do you use for cooking?.. ELECTRICITY 1
GAS 2
KEROSENE 3
CHARCOAL 4
FIREWOOD 5
6. Where do you put your garbage?..... PRIVATE DUSTBIN 1
COLLECTED BY CITY 2
COMMUNAL DUSTBIN 3
COMMUNAL DUMP 4
THROWN IN STREET 5
BURNED 6
HOUSEHOLD COMPOST 7

SKIP TO NEXT PAGE

7. How often is garbage collected? CODE TIMES PER MONTH:

--	--

These next questions are about your water source and other utilities.

8. What is the source of your drinking water supply?
- | | |
|--------------------|---|
| HOUSE CONNECTION | 1 |
| PLOT CONNECTION | |
| OR STANDPIPE | 2 |
| WATER PEDDLERS | 3 |
| WELL | 4 |
| STREAM OR RIVER | 5 |
| LAKE OR STILL POND | 6 |
| SPRING | 7 |
| OTHER (Specify) | 8 |
- SPECIFY "OTHER": _____
- _____
- _____

9. Do you share that source with other households or is it for your own private use?.....
- | | |
|---------|--------|
| PRIVATE | SHARED |
| 1 | 2 |

IF PRIVATE: SKIP to Q. 11.

10. IF SOURCE IS SHARED: About how many households use this source?.....

--	--

11. Do you pay anything for the use of that source?

YES	NO
1	2

12. How much do you pay: each month?.....

--	--

to connect the system?.....

--	--

13. For what purposes? INSERT "2", "3", or "4" FOR SECOND, THIRD OR FOURTH SOURCE IN APPROPRIATE BOX.

	Personal Washing	Kitchen Use	Washing Clothes	Garden/ Live- Stock	Business Uses	Other Uses
House Connection						
Plot Connection or Standpipe						
Water Peddlers						
Well						
Stream or River						
Lake or Still Pond						
Spring						
Other (Specify)						

SPECIFY OTHER, SOURCE AND USE: _____

14. What type of sewer is there?.....
- | | |
|-----------------|---|
| PUBLIC SEWER | 1 |
| CESSPOOL | 2 |
| PIT LATRINE | 3 |
| NONE | 4 |
| OTHER (Specify) | 5 |

IX. TRAVEL DISTANCE, TIME AND COSTS

1. How far is this house from the center of town?.....

--	--	--

2. And how far away are these things:

a paved road?

--	--	--

street lighting?

--	--	--

a bus stop?

--	--	--

a hospital?

--	--	--

a clinic?

--	--	--

a church/mosque?

--	--	--

3. How far away is the head of the household's place
of work (in kilometers)?.....

--	--	--

4. About how long does it take for him/her to get there?..
RECORD MINUTES.

--	--

X. PREVIOUS RESIDENCE

YEARS

1. How-long have you been living here?.....

--	--

XI. OPINION ABOUT NEIGHBORHOOD AND HOUSE

- | | | |
|---|----------------------|---|
| 1. Do you currently rent or own this house? | RENT | 1 |
| PROBE: Do you also own land? | WORK IN LIEU OF RENT | 2 |
| | LIVE RENT FREE | 3 |
| | OWN HOUSE AND LAND | 4 |
| | OWN HOUSE ONLY | 5 |

XII. INFORMATION ON RENTERS

- | | | |
|---------------------------------|---------------------|---|
| 1. Who owns this dwelling?..... | PRIVATE OWNER | 1 |
| | RELATIVE | 2 |
| | GOVERNMENT | 3 |
| | REAL ESTATE COMPANY | 4 |
| | OTHER | 5 |

SKIP TO Q. 3.

- | | | |
|--|-----|----|
| 2. Does the owner live in the building?..... | YES | NO |
| | 1 | 2 |
| 3. Are you or any household member related to landlord?... | YES | NO |
| | 1 | 2 |
| 4. Do you have a lease or contract with the owner?..... | YES | NO |
| | 1 | 2 |

MONTHS

How long?.....

--	--

- | | | |
|--|-----|----|
| 5. Are you, as tenant, allowed to sublease?..... | YES | NO |
| | 1 | 2 |
| 6. Did you pay a deposit when you moved in?..... | YES | NO |
| | 1 | 2 |

7. How much did you pay to the owner?.....
- to the previous tenant?.....
- to the broker?.....
- to someone else?.....

8. Will you get the deposit back when you leave?..... YES NO
 1 2

9. Will you be paid interest on your deposit?..... YES NO
 1 2

10. And how much rent do you pay now?.....

--	--	--	--

 AMOUNT _____ PER _____

11. How much do you think a place like this
 would sell for in today's market?.....

--	--	--	--	--	--

	YES	NO
12. Does your rent include:.....furniture?	1	2
lighting?	1	2
cooking fuel?	1	2
heating fuel?	1	2
water?	1	2
garbage collection?	1	2

13. Do you rent any rooms to other people?..... 1 2

14. How many rooms do you rent out?.....

--	--

15. How many people do you rent to?.....

--	--

16. How much do they pay you each month?.....

--	--	--	--

XIII. OWNERS - ACQUISITION AND FINANCING OF THE HOUSE

1. Do you own all or just part of the building?..... ALL 1
PART 2

2. Do you own the land on which this house is built? PROBE: Is that all of the land or just part? ALL OF THE LAND 1
PART OF THE LAND 2
NONE 3

3. Do you have legal title to the land?..... YES NO
1 2

4. Do you have a deed or legal title to this house?..... YES NO
1 2

5. When did you acquire this house? CODE YEAR.....

--	--

6. Did you build this house yourself, or did you inherit it or purchase it? PROBE: BOUGHT NEW 1
Was it a new house when you bought it? BOUGHT USED 2
BUILT HOUSE 3
INHERITED 4
OTHER 5

7. How much did you pay for: the building?

--	--	--	--	--	--

the land?

--	--	--	--	--	--

building materials?

--	--	--	--	--	--

labor?

--	--	--	--	--	--

any other costs?

--	--	--	--	--	--

8. What is the original land area of the lot?

Area in m²

--	--	--	--

9. Have you sold any of the land which you initially got?.....

YES	NO
1	2

IF NO, SKIP TO Q. 11.

10. What is the land area of the land which you sold?

Area in m²

--	--	--	--

11. Of the land you own, about how much would you say a similar piece would sell for today?.....

--	--	--	--

12. How much would the whole unit, including the house and the land, sell for today?....

--	--	--	--

13. If you rented this unit out to another household, what could you charge as a monthly rent?.....

--	--	--	--

XVI. HOUSEHOLD INCOME AND EXPENDITURES

These last questions are about your income and expenses.

1. How much income did your household receive last month from the head of household's earnings?.....

--	--	--	--	--	--

ENTER "0" IF NO INCOME.

2. And how much income from other members' earnings?.....

--	--	--	--	--	--

ENTER "0" IF NO INCOME.

3. Did this household receive any income from rent? How much?.....

--	--	--	--	--	--

ENTER "0" IF NO INCOME FROM RENT

4. Did your household receive any gifts or money last month? How much?.....

--	--	--	--	--	--

ENTER "0" IF NO GIFTS

5. What about pensions or other payments from the government or an employer-- did your household receive any of this kind of income?.....

--	--	--	--	--	--

ENTER "0" IF NONE

6. **ADD TOTAL AND SAY:** Then your monthly income was about _____, is that right?
TOTAL INCOME.....

--	--	--	--	--	--

CODES FOR QUESTIONS: LESS THAN ONE MONTHS' INCOME = 1
ONE TO TWO MONTHS' INCOME = 2
THREE TO SIX MONTHS' INCOME = 3
MORE THAN SIX MONTHS' INCOME = 4

	YES	NO	AMT. CODE
Do you have any cash savings? IF YES: Would that be about a month's income, or more or less? IF MORE: More than three or six months?.....	1	2	<input type="checkbox"/>
Do you have any savings in financial institutions? IF YES: Would that be about a month's income, or more or less? IF MORE: More than three or six months?.....	1	2	<input type="checkbox"/>
Do you have any savings in the form of pensions? IF YES: Would that be about a month's income, or more or less? IF MORE: More than three or six months?.....	1	2	<input type="checkbox"/>
Do you have any savings in mandatory contribution schemes? IF YES: Would that be about a month's income, or more or less? IF MORE: More than three or six months?.....	1	2	<input type="checkbox"/>
Do you have any outstanding loans to people? IF YES: Would that be about a month's income, or more or less? IF MORE: More than three or six months?.....	1	2	<input type="checkbox"/>

	YES	NO
(Besides this house) Do you own any residential property?..	1	2
Do you own any commerical property?.....	1	2
Do you own any other kind of property?.....	1	2

Now I'm going to read a list of things that you may or may not own, and I'd like you to tell me how many of each of them you own:

	NUMBER
Air conditioners.....	<input type="checkbox"/>
Televisions.....	<input type="checkbox"/>
Refrigerators or freezers..	<input type="checkbox"/>
Telephones.....	<input type="checkbox"/>
Automobiles.....	<input type="checkbox"/>
Motorcycles.....	<input type="checkbox"/>
Stereos.....	<input type="checkbox"/>
Radios.....	<input type="checkbox"/>

7. Finally, I'd like you to think about your expenses last month.
About how much did your household spend last month for:

Food?.....						
Meals eaten outside the house?...						
Clothing?.....						
Transportation?.....						
Fuel for heating?.....						
Fuel for cooking?.....						
Furniture?.....						
Education?.....						
Doctor and medicine?.....						
Hire purchase?.....						
Taxes?.....						
Payment for house purchase?.....						
Rent?.....						
Payment for house construction and/or maintenance?.....						
Water?.....						
Electricity?.....						
Garbage collection?.....						
Gifts or loans to friends or relatives?.....						
Entertainment?.....						
Loan repayments?.....						
Savings?.....						

Did your household have any other major
expense last month? How much?.....

--	--	--	--	--	--

THANK RESPONDENT AND TERMINATE INTERVIEW.

TIME INTERVIEW ENDED: _____ am/pm.

LONG HOUSING QUESTIONNAIRE

HOUSING SURVEY

I. CLASSIFICATION DATA

1. Questionnaire number (precoded): _____
2. Household ID: _____
3. Address: _____
4. Sample enumeration district: _____
5. Census tract: _____
6. Urban/Rural..... URBAN 1
RURAL 2
7. City/Suburb..... CITY 1
SUBURB 2
N/A 9
8. Date of Interview: _____
9. Time of interview: _____ am/pm
10. Interviewer's name: _____
11. Supervisor's code: _____

II. DWELLING UNIT INTERVIEWER OBSERVATIONAL DATA

12. Type of structure DETACHED HOUSE 1
ATTACHED HOUSE OR DUPLEX 2
APARTMENT OR FLAT 3
SEPARATE ROOM 4
TENT OR LEAN-TO 5
OTHER (SPECIFY) 6

SPECIFY "OTHER": _____

13. Wall material (exterior) MUD 1
MUD AND CEMENT 2
STONE 3
BLOCKS 4
BRICKS 5
PLASTER 6
WOOD 7
OTHER (SPECIFY) 8

SPECIFY "OTHER": _____

14. Roof material.....	THATCH	1
	CORRUGATED IRON	2
	ASBESTOS	3
	TILES	4
	TIN	5
	CONCRETE	6
SPECIFY "OTHER": _____	ASPHALT	7
_____	WOOD	8
_____	OTHER (SPECIFY)	9

15. Is there a separate entrance?	YES	NO
	1	2

16. Is there a porch or veranda?	YES	NO
	1	2

17. Fencing.....	BAMBOO	1
	WOOD	2
	STONE	3
	CONCRETE BLOCKS	4
	GRILLS	5

18. Number of floors in building.....	<table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>		

19. Elevators	ONE	1
	MORE THAN ONE	2
	NONE	3

20. Condition of structure.....
- | | |
|----------------------------|---|
| VERY WELL MAINTAINED | 1 |
| REASONABLY WELL MAINTAINED | 2 |
| SOMEWHAT BADLY MAINTAINED | 3 |
| VERY BADLY MAINTAINED | 4 |
21. What type of road leads to the house?.....
- | | |
|----------------------|---|
| NONE | 1 |
| UPGRADED | 2 |
| GRADED BUT NOT PAVED | 3 |
| PAVED | 4 |
22. What is the width of the road?...
- | | |
|-----------------------|---|
| LESS THAN 3 METERS | 1 |
| 3-8 METERS | 2 |
| GREATER THAN 8 METERS | 3 |
23. Are there sidewalks on the street leading to the house?.....
- | | YES | NO |
|--|-----|----|
| | 1 | 2 |
24. Are there curbs on the road?
- | | YES | NO |
|--|-----|----|
| | 1 | 2 |
25. Cleanliness of streets.....
- | | |
|-----------------|---|
| CLEAN | 1 |
| SOME GARBAGE | 2 |
| LOTS OF GARBAGE | 3 |

III. VACANT UNIT

SKIP TO Q. 35 IF UNIT OCCUPIED

26. Respondent:..... LANDLORD 1
 SPECIFY "OTHER": _____ REAL ESTATE AGENT 2
 _____ NEIGHBOR 3
 _____ OTHER (SPECIFY) 4
27. Is this unit intended for year-round use, seasonal use, or use by temporary workers? YEAR-ROUND 1
 SEASONAL 2
 EXPLAIN CODES "4" OR "5": _____ TEMPORARY 3
 _____ OTHER HOUSING UNIT 4
 _____ NOT A HOUSING UNIT 5
28. Is this unit for rent, for sale, rented but not occupied, sold but not occupied, held for occasional use, or something else? VACANT FOR RENT 1
 VACANT FOR SALE 2
 VACANT FOR RENT OR SALE 3
 SPECIFY "OTHER": _____ RENTED/NOT OCCUPIED 4
 _____ SOLD/NOT OCCUPIED 5
 _____ OCCASIONAL USE 6
 _____ OTHER (SPECIFY) 7
29. How many months has the unit been vacant?.....
30. How many rooms are in this unit?.....
31. Does this unit have: electricity?..... YES NO
 1 2
 running water?..... 1 2
 a flush toilet?..... 1 2

32. How much would this unit rent for (per month/
week) on the open market?.....

--	--	--	--

33. How much would this unit sell for on
the open market?.....

--	--	--	--	--	--

34. What is the lot size?..... _____

END INTERVIEW

IV. SCREENING FOR USUAL PLACE OF RESIDENCE

35. Do you live here for half the year or more?..... YES NO

1 0

IF YES, SKIP TO SECTION V.

36. Where you you usually live? _____

DO NOT CODE

--	--

37. Why are you living here now? RECORD

JOB SEARCH 1

RESPONSE, THEN CODE: _____

VACATION 2

VISIT TO RELATIVES 3

OTHER 4

V. HOUSEHOLD COMPOSITION

These next questions are about you and the members of your household.

1. First, could you tell me the names of all the members of your household who live here?
Let's start with the head of the household. RECORD EACH HOUSEHOLD MEMBER'S NAME; THEN ASK FOR EACH:
2. FOR OTHER THAN HEAD: What is (NAME's) relationship to head of the household?

01 HEAD	03 SON OF HEAD	05 FATHER	07 BROTHER	09 UNCLE	11 COUSIN	13 NOT RELATED
02 WIFE	04 DAUGHTER	06 MOTHER	08 SISTER	10 AUNT	12 OTHER RELATIVE	
3. How old is (NAME)? RECORD AGE.
4. (IF NOT CLEAR) Is (NAME) male or female? 1 MALE 2 FEMALE
5. What is his/her marital status?

1 SINGLE	3 WIDOWED	5 SEPARATED
2 MARRIED	4 DIVORCED	
6. Is (NAME) now attending school? IF YES: Is that a public or private school?

1 YES, PUBLIC	2 YES, PRIVATE	3 NOT ATTENDING
---------------	----------------	-----------------
7. What is the highest grade of school that he/she has completed? RECORD GRADE NUMBER.

ATTEND COLLEGE = 13	ILLITERATE = 98
COLLEGE GRADUATE = 16	READ & WRITE = 97
GRADUATE SCHOOL = 18	

8. Last month, was he/she working, looking for work, attending school or doing something else?

1 WORKING

4 OTHER: SPECIFY LINE NUMBER AND ACTIVITY: _____

2 LOOKING FOR WORK _____

3 ATTENDING SCHOOL _____

9. IF WORKING: What kind of work is (NAME) doing? _____

10. IF WORKING: And what about how many hours does he/she work each week? _____

11. Does (NAME) contribute some income to help support this household? 1 YES 2 NO

12. How long has he/she been living here? RECORD NUMBER OF YEARS.

13. ASK RESPONDENT ONLY: What tribe/caste/ethnic group does (NAME) belong to? _____

CODE RESPONSES TO Q. (1) THROUGH (12) FOR EACH HOUSEHOLD MEMBER:

	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
	NAME	RELATIONSHIP TO HEAD OF HOUSEHOLD	AGE	SEX	MARITAL STATUS	ATTENDING SCHOOL OR COLLEGE	HIGHEST GRADE REACHED	ECONOMIC ACTIVITY LAST MONTH	TYPE OF WORK	NUMBER OF HOURS	HOUSEHOLD INCOME CONTRIBUTOR	HOW LONG LIVING (HERE)
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												

31. Line number of respondent: _____

32. Line number of household head: _____

14. Do you have any relatives employed overseas?..... YES NO
1 2

IF NO, SKIP TO Q. 17.

15. How many?

--	--

16. Do they send you any money?..... YES NO
IF YES: How much each month? _____ 1 2

17. How many other households live here?.....

--

IF NONE, SKIP TO SECTION VI, NEXT PAGE.

18. For how many years have they lived here?.....

--	--

19. (In total) How many household members do they have?....

--	--

VI. HEALTH

Now I'd like to ask you some questions about your family's health.

1. Have any household members--either adults or children-- YES NO
been sick or injured in the past month?..... 1 2

IF NO, SKIP TO Q.3.

2. I'd like to know the (a) name of each person and (b) what was the matter with them. PROBE: Anyone else?

(c) Did (NAME) miss any days of school/work?

(d) Did anyone treat him/her for the illness/injury?

	(a)	(b)		(c)		(d)	(e)
	NAME	ILLNESS/ INJURY DESCRIBE	CODE	NO. DAYS MISSED		TREATED BY	HOSP/ CLINIC?
				SCHOOL	WORK		
1							
2							
3							
4							
5							
6							

(b) "ILLNESS/INJURY" CODES: (d) "TREATED BY" CODES: (f) HOSPITAL/
CLINIC:

1 = INJURY
2 = DIARRHEA
3 = VOMITTING
4 = FEVER
5 = WORMS/PARASITES
6 = SKIN INFECTIONS
7 = EYE INFECTIONS
8 = OTHER

1 = RELATIVE
2 = NEIGHBOR/FRIEND
3 = TRADITIONAL HEALER
4 = NURSE/MIDWIFE
5 = DOCTOR
6 = OTHER

1 = YES
2 = NO

3. During the last year, have any women in this household had any pregnancies which ended in a miscarriage or a stillborn baby?..... YES NO

1 2

IF NO, SKIP TO Q.5.

4. How many pregnancies ended this way?.....

5. Did any children in this household die during the last year?..... YES NO

1 2

IF NO, SKIP TO NEXT PAGE.

6. What was the cause of their death?

7. How old were they when they died? RECORD BELOW.

	CAUSE OF DEATH	CODE	AGE	
CHILD #1				
CHILD #2				
CHILD #3				
CHILD #4				

CODES:

- 1 = INJURY
- 2 = DIARRHEA
- 3 = VOMITTING
- 4 = FEVER
- 5 = WORMS/PARASITES
- 6 = SKIN INFECTIONS
- 7 = EYE INFECTIONS
- 8 = OTHER

VII. CHARACTERISTICS OF THE DWELLING

1. INTERVIEWER OBSERVATION: PRIMARY FLOOR MATERIAL

EARTH	1
WOOD	2
STONE	3
TILE	4
BRICK	5
CONCRETE/CEMENT	6
OTHER/SPECIFY	7

These next questions are about your home.

2. Do you know when this (building/house) was built?

IF NOT SURE: What would be your best estimate?

RECORD YEAR.....

3. IF NOT A SINGLE FAMILY BUILDING: How many dwelling units (including your own), are there in this building?.....

4. What is the approximate area of this dwelling unit (in square meters?.....

EXPLAIN TOTAL AREA: _____

5. How many floors are there in this dwelling unit?.....

6. How many rooms do you have in this dwelling unit?..... DEFINE ROOMS.

7. Is your dwelling unit used only for residence, or is it also used for business?

RESIDENCE ONLY	1
RESIDENCE/BUSINESS	2

IF RESIDENCE ONLY, SKIP TO Q. 9.

8. How many rooms are used for business?.....

9. (And) how many rooms are used for sleeping?.....

10. How many complete bathrooms do you have here?

By "complete" I mean _____

VIII. HOUSING SERVICES

1. Does this unit have electricity?..... YES NO
1 2
 2. What kind of lighting do you have here--
electricity, oil or gas, or what?..... ELECTRICITY 1
OIL LAMP 2
GAS 3
OTHER 4
 3. Is your kitchen inside or outside?..... INSIDE 1
OUTSIDE 2
NONE 3
 4. Do you share it or have exclusive use?..... SHARE 1
EXCLUSIVE USE 2
 5. What kind of fuel do you use for cooking?.. ELECTRICITY 1
GAS 2
KEROSENE 3
CHARCOAL 4
FIREWOOD 5
 6. Where do you put your garbage?..... PRIVATE DUSTBIN 1
COLLECTED BY CITY 2
COMMUNAL DUSTBIN 3
COMMUNAL DUMP 4
THROWN IN STREET 5
BURNED 6
HOUSEHOLD COMPOST 7
- SKIP TO NEXT PAGE
7. How often is garbage collected? CODE TIMES PER MONTH:

These next questions are about your water source and other utilities.

8. What is the source of your drinking water supply?
- | | |
|--------------------|---|
| HOUSE CONNECTION | 1 |
| PLOT CONNECTION | |
| OR STANDPIPE | 2 |
| WATER PEDDLERS | 3 |
| WELL | 4 |
| STREAM OR RIVER | 5 |
| LAKE OR STILL POND | 6 |
| SPRING | 7 |
| OTHER (Specify) | 8 |
- SPECIFY "OTHER": _____
- _____
- _____

9. Do you share that source with other households or is it for your own private use?.....
- | | |
|---------|--------|
| PRIVATE | SHARED |
| 1 | 2 |

IF PRIVATE: SKIP to Q. 11.

10. IF SOURCE IS SHARED: About how many households use this source?.....

--	--

11. Do you pay anything for the use of that source?

YES	NO
1	2

IF NO, SKIP TO Q. 13.

12. How much do you pay: each month?.....

--	--

to connect the system?.....

--	--

IF SOURCE IS HOUSE CONNECTION, SKIP TO Q.20.

13. How much would you be willing to pay for a similar unit but with piped water inside the house?

PER MONTH RENT

HOUSE PURCHASE PRICE

14. How far away is your current drinking water source?.....

EST. METERS

15. How long does it take to go there, fetch water, and come back?..... MINUTES

--	--

16. Who collects the water?.....

	OFT	SOME	NEV
MEN	2	1	0
WOMEN	2	1	0
CHILDREN	2	1	0

OFTEN = 2; SOMETIMES = 1; NEVER = 0.

17. How much water is collected each time?..... EST. LITERS

--	--

18. How many times a day is water collected?..... TIMES

--	--

19. IF SOURCE IS WELL: What type of pump is used to bring water to the surface?.....

ELECTRIC PUMP	1
HANDPUMP	2
BUCKET	3
OTHER (Specify)	4

20. How frequently does this water system break down?.....

SPECIFY "OTHER": _____

NEVER	1
DRY SEASON	2
MONTHLY	3
WEEKLY	4
DAILY	5
OTHER (Specify)	6

21. Do you use the same system for drinking water in the rainy season and in the dry season?..... YES NO

IF NO: How is it different? 1 2

RECORD RESPONSE: _____

22. Do you use any other water sources for purposes other than drinking?..... YES NO

1 2

IF NO, SKIP TO PAGE 21.

23. For what purposes? INSERT "2", "3", or "4" FOR SECOND, THIRD OR FOURTH SOURCE IN APPROPRIATE BOX.

	Personal Washing	Kitchen Use	Washing Clothes	Garden/ Live- Stock	Business Uses	Other Uses
House Connection						
Plot Connection or Standpipe						
Water Peddlers						
Well						
Stream or River						
Lake or Still Pond						
Spring						
Other (Specify)						

SPECIFY OTHER, SOURCE AND USE: _____

24. Do you pay anything for these sources?...
ENTER "0" IF NO CHARGE.

2ND SOURCE

3RD SOURCE

4TH SOURCE

MONTHLY CONNECTION
CHARGE CHARGE

25. Do you share (NAME SOURCE) with other households or is it for your own private use? (REPEAT FOR EACH SOURCE)

PRIV SHAR

2ND SOURCE

3RD SOURCE

4TH SOURCE

1	2
1	2
1	2

PRIVATE = 1; SHARED = 2.

SKIP TO Q. 27 IF ALL SOURCES ARE PRIVATE.

26. IF ANY SOURCE IS SHARED: About how many households use this source?

HOUSEHOLDS

2ND SOURCE		
3RD SOURCE		
4TH SOURCE		

27. How far away are these sources?

METERS

2ND SOURCE		
3RD SOURCE		
4TH SOURCE		

28. How long does it take to go there, fetch water, and come back?

MINUTES

2ND SOURCE		
3RD SOURCE		
4TH SOURCE		

16. Who collects the water?.....

	2ND SOURCE		
	OFT	SOME	NEV
MEN	2	1	0
WOMEN	2	1	0
CHILDREN	2	1	0

	3RD SOURCE		
	OFT	SOME	NEV
MEN	2	1	0
WOMEN	2	1	0
CHILDREN	2	1	0

	4TH SOURCE		
	OFT	SOME	NEV
MEN	2	1	0
WOMEN	2	1	0
CHILDREN	2	1	0

OFTEN = 2; SOMETIMES = 1; NEVER = 0.

30. How much water is collected each time?

LITRES

2ND SOURCE

3RD SOURCE

4TH SOURCE

31. How many times a day is water collected?

TIMES

2ND SOURCE

3RD SOURCE

4TH SOURCE

32. IF ANY SOURCES ARE WELLS: What type of pump is used to bring water to the surface?

	ELECTRIC PUMP	HAND PUMP	BUCKET	OTHER
2ND SOURCE	1	2	3	4
3RD SOURCE	1	2	3	4
4TH SOURCE	1	2	3	4

33. How frequently does this water system break down?

	NEVER	DRY SEASON	MONTHLY	WEEKLY	DAILY	OTHER: SPECIFY
2ND SOURCE	1	2	3	4	5	6
3RD SOURCE	1	2	3	4	5	6
4TH SOURCE	2	2	3	4	5	6

These next questions are about bathing facilities in your dwelling unit.

34. How many faucets do you have in this unit?.....
 IF ONE OR MORE: How many are for your family's use only?..
 How many are working?.....

35. How many showers do you have?.....
 IF ONE OR MORE: How many are for your family's use only?..
 How many are working?.....

36. And how many bathtubs do you have?.....
 IF ONE OR MORE: How many are for your family's use only?..
 How many are working?.....

37. What kind of toilet facilities do you have?... NONE 1
 OPEN LATRINE 2
 COVERED PIT
 RECORD RESPONSE; THEN CODE: _____ LATRINE 3
 _____ BUCKET LATRINE 4
 _____ ANTIPOLO TYPE
 OR BUCKET
 FLUSH 5
 FLUSH/WATER
 SEALED 6

38. How many toilets are available for your family's use?.....

39. How many are for your family's use only?.....

40. How many are working?.....

41. Are there any (other) problems with the toilet facilities, such as:	YES	NO
flies or mosquitoes;	1	2
does not flush properly;	1	2
needs water;	1	2
smells bad;	1	2
flooding in the rainy season;	1	2
difficult for younger children to use;	1	2
needs emptying.	1	2

PROBE: Are there any other problems? RECORD RESPONSE: _____

42. What type of sewer is there?.....	PUBLIC SEWER	1
	CESSPOOL	2
	PIT LATRINE	3
	NONE	4
	OTHER (Specify)	5

43. Do you pay anything for sewage disposal?	YES	NO
CONNECTION CHARGES	1	2
MAINTENANCE CHARGES	1	2
PUMPING OUT TANKS	1	2

IF NO, SKIP TO Q. 45.

44. How much do you pay per month or year?....	PER MONTH	<input type="text"/>	<input type="text"/>
	PER YEAR	<input type="text"/>	<input type="text"/>

45. Is there any other drainage?.....	COVERED	1
	OPEN, UNLINED	2
	OPEN, LINED	3

IX. TRAVEL DISTANCE, TIME AND COSTS

1. How far is this house from the center of town?.....

2. And how far away are these things:

a paved road?

street lighting?

a bus stop?

a hospital?

a clinic?

a church/mosque?

3. How far away is the head of the household's place of work (in kilometers)?.....

4. About how long does it take for him/her to get there?..
RECORD MINUTES.

5. How does he/she usually get there?

WALK	1
BICYCLE	2
BUS	3
MOTORCYCLE	4
CAR	5
OTHER	6

6. And how much does it cost each week?.....

7. And what about (SPOUSE), how far away is his/her place of work?.....

8. About how long does it take for him/her to get there?
RECORD NUMBER OF MINUTES.

--	--

9. How does he/she usually get there?

WALK	1
BICYCLE	2
BUS	3
MOTORCYCLE	4
CAR	5
OTHER	6

10. And how much does it cost each week?.....

--	--	--

Do you have any children in school? (IF NO, SKIP TO PAGE 25.)
NO CODE FOR THIS QUESTION.

11. Are any children in nursery school? IF NO ENTER "0" AND
SKIP TO Q. 13. How many?.....

--

12. How much does it cost each week (for each child)?..

--	--	--

13. Are there any children in primary school? IF NO,
ENTER "00" AND SKIP TO Q. 15. How many?.....

--	--

14. How much does it cost each week (for each child)?..
IF NO COST, ENTER "000".

--	--	--

15. Are there any children in secondary school? IF NO,
ENTER "00" AND SKIP TO NEXT PAGE. How many?.....

--	--

16. How much does it cost each week (for each child)?..

--	--	--

X. PREVIOUS RESIDENCE

1. How long have you been living here?.....

--	--

2. Why did you decide to leave your last place of residence?

3. And why did you decide to move to this neighborhood?

ORDER MENTIONED:
1st 2nd 3rd 4th

LOOKING FOR A JOB 1
STARTING WORK FOR THE FIRST TIME 2
JOB TRANSFER 3
CHANGING TYPE OF JOB 4
EDUCATION (FOR RESPONDENT/HEAD HOUSEHOLD) 5
EDUCATION (FOR CHILDREN) 6
EDUCATION (FOR OTHER FAMILY MEMBERS) 7
MARRIAGE 8
DIVORCE 9
WIDOWHOOD 10
TO LIVE WITH OR NEAR FAMILY 11
DISPLACEMENT 12
HEALTH REASONS 13
IMPROVED LIVING CONDITIONS 14
EVICTION 15
RETURN FROM ABROAD 16
RETIREMENT 17
OTHER (SPECIFY): _____ 18

4. In your last home, how many rooms did you have?.....

5. And how many of those were bedrooms?.....

6. How many people lived there?.....

7. Where did you get your water? ,... .. PIPED INSIDE 1
PIPED OUTSIDE 2
WELL 3
OTHER 4

8. And what kind of toilet facilities did you have? WC - INSIDE 1
WC - OUTSIDE 2
PIT 3
OPEN AIR 4

XI. OPINION ABOUT NEIGHBORHOOD AND HOUSE

These next questions are about how you feel about living here.

1. First, how satisfied are you with this neighborhood as a place to live--are you?.....
- | | |
|---------------------|---|
| very satisfied, | 1 |
| somewhat satisfied, | 2 |
| or not satisfied? | 3 |

2. What are the things you like most about this area? PROBE FOR UP TO THREE RESPONSES: Anything else?

RECORD RESPONSE; THEN CODE: _____

	FIRST IN IMPORTANCE	SECOND IN IMPORTANCE	THIRD IN IMPORTANCE
THE AREA IS HEALTHY	1	2	3
SOCIAL ENVIRONMENT IS APPROPRIATE	1	2	3
QUIET AND CLEAN	1	2	3
MEANS OF TRANSPORT ARE SUFFICIENT	1	2	3
SCHOOLS	1	2	3
STORES AND SHOPS CLOSE BY	1	2	3
HEALTH SERVICES CLOSE BY	1	2	3
OTHER (SPECIFY)	1	2	3

3. What are the things that you don't like about this area? PROBE FOR UP TO THREE RESPONSES. Anything else?

RECORD RESPONSE; THEN CODE: _____

	FIRST IN IMPORTANCE	SECOND IN IMPORTANCE	THIRD IN IMPORTANCE
HEALTH REASONS:			
GARBAGE IN THE STREETS	1	2	3
GARBAGE IN CANALS AND DITCHES	1	2	3
RATS	1	2	3
FLIES AND INSECTS	1	2	3
OVERFLOWING SEWERS	1	2	3
AIR POLLUTION	1	2	3
LACK OF PURE WATER	1	2	3
LACK OF SEWERS	1	2	3
LACK OF ADEQUATE HEALTH FACILITIES	1	2	3
GENERAL REASONS:			
LACK OF ELECTRICITY	1	2	3
LACK OF SUFFICIENT TRANSPORT	1	2	3
LACK OF SCHOOLS	1	2	3
A LOT OF POWER OUTAGES	1	2	3
A LOT OF WATER OUTAGES AND THE WATER DOESN'T GET TO THE HIGHEST FLOORS	1	2	3
LOTS OF WORKSHOPS AND NOISE	1	2	3
THE SOCIAL ENVIRONMENT IS NOT APPROPRIATE	1	2	3

4. Do you like this neighborhood more, less, or about the same as the one you lived in before you moved here?

MORE.	1
LESS	2
SAME	3

5. And how satisfied are you with this (house/apartment)? Are you?.....

very satisfied,	1
somewhat satisfied,	2
or not satisfied?	3

6. What are the things you like most about your house? PROBE FOR UP TO THREE RESPONSES: Anything else?

RECORD RESPONSE; THEN CODE: _____

	FIRST IN IMPORTANCE	SECOND IN IMPORTANCE	THIRD IN IMPORTANCE
SUFFICIENT NUMBER OF ROOMS	1	2	3
HEALTHY DWELLING	1	2	3
SOCIAL ENVIRONMENT OF THE NEIGHBORHOOD	1	2	3
NEIGHBORHOOD IS QUIET AND CLEAN	1	2	3
RENT IS CHEAP	1	2	3
CLOSE TO TRANSPORTATION	1	2	3
CLOSE TO SCHOOLS	1	2	3
CLOSE TO WORKPLACE	1	2	3
CLOSE TO FAMILY AND FRIENDS	1	2	3
OWNER	1	2	3
OTHER (SPECIFY)	1	2	3

7. What are the things that you don't like about this house? PROBE FOR UP TO THREE RESPONSES: Anything else?

RECORD RESPONSE; THEN CODE: _____

	FIRST IN IMPORTANCE	SECOND IN IMPORTANCE	THIRD IN IMPORTANCE
NUMBER OF ROOMS IS NOT SUFFICIENT	1	2	3
DWELLING IS NOT HEALTHY	1	2	3
SOCIAL ENVIRONMENT IS NOT APPROPRIATE	1	2	3
NEIGHBORHOOD IS NOISY AND NOT CLEAN	1	2	3
RENT IS EXPENSIVE	1	2	3
FAR FROM TRANSPORT	1	2	3
FAR FROM SCHOOLS	1	2	3
FAR FROM WORKPLACE	1	2	3
FAR FROM FAMILY AND FRIENDS	1	2	3
OTHER (SPECIFY)	1	2	3

8. Do you like this house more, less or about the same
as the house you lived in before you moved here?
- | | |
|------|---|
| MORE | 1 |
| LESS | 2 |
| SAME | 3 |

9. Do you currently rent or own this
house? PROBE: Do you also own land?
- | | |
|----------------------|---|
| RENT | 1 |
| WORK IN LIEU OF RENT | 2 |
| LIVE RENT FREE | 3 |
| OWN HOUSE AND LAND | 4 |
| OWN HOUSE ONLY | 5 |

10. Would it be better for you to (own/rent)?..... YES NO
1 2

11. Why is that? RECORD RESPONSE: _____

12. Have you ever been threatened with eviction while YES NO
living here?..... 1 2

IF YES, when was the most recent time?..... YEAR

--	--

WORK IN LIEU OF RENT OR LIVE RENT FREE: SKIP TO SECTION XV.

OWN HOUSE ONLY OR HOUSE AND LAND: SKIP TO SECTION XIII.

RENTERS: CONTINUE.

XII. INFORMATION ON RENTERS

1. Why did you decide to rent?

DO NOT
CODE

☐

2. If financing had been available, would you have bought this place instead of renting it?..... YES NO
1 2

3. Who owns this dwelling?..... PRIVATE OWNER 1
RELATIVE 2
GOVERNMENT 3
REAL ESTATE COMPANY 4
OTHER 5

SKIP TO Q. 3.

4. Does the owner have legal title to the land?.... YES NO DON'T KNOW
1 2 3

5. Does the owner live in the building?..... YES NO
1 2

6. Are you or any household member related to landlord?... YES NO
1 2

7. Do you have a lease or contract with the owner?..... YES NO
1 2

MONTHS

How long?.....

--	--

8. Are you, as tenant, allowed to sublease?..... YES NO
1 2

9. Did you pay a deposit when you moved in?..... YES NO
1 2

10. How much did you pay to the owner?.....

to the previous tenant?.....

to the broker?.....

to someone else?.....

11. Will you get the deposit back when you leave?..... YES NO
1 2

12. Will you be paid interest on your deposit?..... YES NO
1 2

PERCENT

13. IF YES: What is the interest rate?

--	--

14. How much was your rent when you first moved in?....

--	--	--	--

AMOUNT _____ PER _____

15. And how much rent do you pay now?.....

--	--	--	--

AMOUNT _____ PER _____

16. How much do you think a place like this
would sell for in today's market?.....

--	--	--	--	--	--

	YES	NO
17. Does your rent include:.....furniture?	1	2
lighting?	1	2
cooking fuel?	1	2
heating fuel?	1	2
water?	1	2
garbage collection?	1	2

18. Do you rent any rooms to other people?..... 1 2

IF NO, SKIP TO Q. 22.

19. How many rooms do you rent out?.....

--	--

20. How many people do you rent to?.....

--	--
21. How much do they pay you each month?.....

--	--	--	--
22. Compared to when you moved in, is the unit in
better condition, worse condition, or is it
in about the same condition?

BETTER	1
SAME	2
WORSE	3
23. Have there been any modifications or additions
to the dwelling since you have lived here?.....

YES	NO
1	2
24. What have been the most important? _____

--	--
25. What did they cost?.....

--	--	--	--
26. Does the owner know about them?.....

YES	NO
1	2
27. Did the owner agree to them?

YES	NO
1	2
28. Who does the required repairs and maintenance in
your dwelling? _____

--	--
29. At your expense or the owner's expense?.....

--	--
30. Did you spend any of your own money on this unit
during the past year?.....

YES	NO
1	2
- IF YES: About how much?.....

--	--	--	--	--	--

31. Is this building properly maintained?..... YES NO
1 2

IF NO: In what way? _____

32. Do you think your dwelling needs modifications, YES NO
changes, improvements or additions?..... 1 2

What are these? _____

33. Do you currently have plans to make these changes or YES NO
or improvements?..... 1 2

SINGLE UNIT BUILDINGS SKIP TO SECTION XV, PAGE 43.

34. Since you moved here, has the number of units in MORE 1
this building changed? PROBE: Are there more or SAME 2
less? LESS 2

IF SAME, SKIP TO PAGE 43.

35. IF MORE OR LESS: What was the change last year?.....

--	--

SKIP TO PAGE 43.

XIII. OWNERS - ACQUISITION AND FINANCING OF THE HOUSE

IF LIVED HERE MORE THAN ONE YEAR, SKIP TO Q. 3.

1. Is this the first time you have owned a house?..... YES NO
1 2
2. IF NO: How many houses have you owned?.....
3. Do you own all or just part of the building?..... ALL 1
PART 2
4. Do you own the land on which this house is built? PROBE: Is that all of the land or just part? ALL OF THE LAND 1
PART OF THE LAND 2
NONE 3
5. Do you have legal title to the land?..... YES NO
1 2
6. Do you have a deed or legal title to this house?..... YES NO
1 2
7. When did you acquire this house? CODE YEAR.....
8. Did you build this house yourself, or did you inherit it or purchase it? PROBE: BOUGHT NEW 1
Was it a new house when you bought it? BOUGHT USED 2
BUILT HOUSE 3
INHERITED 4
OTHER 5
9. How much did you pay for: the building?
the land?
building materials?
labor?
any other costs?

10. What is the original land area of the lot?

Area in m²

--	--	--	--

11. Have you sold any of the land which you initially got?..... YES NO
1 2

IF NO, SKIP TO Q. 13.

12. What is the land area of the land which you sold?

Area in m²

--	--	--	--

13. Of the land you own, about how much would you say a similar piece would sell for today?.....

--	--	--	--

14. How much would the whole unit, including the house and the land, sell for today?....

--	--	--	--

15. If you rented this unit out to another household, what could you charge as a monthly rent?.....

--	--	--	--

16. How did you finance the purchase of of this unit? (Amount of the down-payment? Amount of the loan?).....

DOWN PAYMENT

--	--	--	--	--

BORROWED/LOAN

--	--	--	--	--

17. Now I'd like to know where you got the downpayment for this house. I'm not asking about money you may have borrowed. Did any of your downpayment come from: READ EACH ITEM, FOR EACH "YES" ASK: About how much of the downpayment came from (SOURCE)? AND RECORD AMOUNT.

	YES	NO	APPROXIMATE AMOUNT				
a. Cash on hand?.....	1	2					
b. Payment from revolving credit scheme? 1	2						
c. Savings plan at work?.....	1	2					
d. Savings plan at other financial institution?.....	1	2					
e. Personal savings (other than from overseas)?.....	1	2					
f. The sale of a house you used to own?. 1	2						
g. The sale of other assets, such as property or jewelry?.....	1	2					
h. Gifts from your parents or relatives? 1	2						
i. Money you inherited?.....	1	2					
j. Remittances from overseas?.....	1	2					

CHECK THAT TOTAL ADDS UP TO APPROXIATELY THE SAME AMOUNT AS IN Q. 16.

18. Now I'd like to know where you got the money you borrowed.

Did you borrow any money from a bank?

	YES	NO	SPECIFY NAME/PROGRAM	APPROXIMATE AMOUNT				
a. BANK #1	1	2						
b. BANK #2	1	2						

Did you get any government loans?

a. GOV'T LOAN	1	2						
b. GOV'T LOAN	1	2						

Did you borrow money from any of these people?

a. RELATIVE	1	2						
b. PARENTS	1	2						
c. FRIENDS	1	2						
d. EMPLOYER	1	2						
e. MONEYLENDER	1	2						
f. ANYONE ELSE	1	2						

- | | | |
|--|----------|---------|
| 19. Do these loans cover other homes or apartment besides this one?..... | YES
1 | NO
2 |
| 20. Do they cover any farm land?..... | 1 | 2 |
| 21. And do the loans cover a business on this property?..... | 1 | 2 |

IF "NO" TO ALL QUESTIONS 19 THROUGH 21, SKIP TO Q. 23.

22. How much of the total amount of the loan applies just to your home?.....

--	--	--	--	--

23. Did you pay property taxes last year?..... YES NO
1 2

IF NO, SKIP TO Q. 25.

24. IF YES: How much?.....

--	--	--	--

25. Did you pay homeowners insurance last year?..... YES NO
1 2

IF NO, SKIP TO Q. 27.

26. IF YES: How much?.....

--	--	--	--

27. About how much do you spend on maintenance on this house each year?.....

--	--	--	--	--	--

28. When you bought this house, did you expect to resell it at any particular time?..... YES NO
1 2

IF NO, SKIP TO NEXT PAGE.

29. IF YES: When did you expect to sell it? CODE YEAR.....

--	--

XIV. UPGRADING AND CONSTRUCTION

FOR OWNERS ONLY; RENTERS SKIP TO PAGE 42.

- | | YES | NO |
|--|----------|---------|
| 1. Did you build this house yourself?..... | 1 | 2 |
| 2. Have you made changes or additions to the house
since you bought/built it)?..... | YES
1 | NO
2 |

IF YES, SKIP TO Q. 4.

3. Was there any particular reason you haven't made any changes or additions?

- | | | |
|------------------------|---|---|
| SPECIFY "OTHER": _____ | LIKE IT THE WAY IT IS | 1 |
| _____ | NOT ENOUGH MONEY | 2 |
| _____ | CAN'T GET BUILDING MATERIALS | 3 |
| _____ | CAN'T GET TECHNICAL HELP/LABOR | 4 |
| | CAN'T GET GOVERNMENT APPROVAL,
BUILDING PERMIT | 5 |
| | AFRAID WE MIGHT BE EVICTED
FROM THE SITE | 6 |
| | BUILDING NOT WORTH IT | 7 |
| | OTHER (Specify) | 8 |

SKIP TO SECTION XV.

4. I would like to know all of the major changes you have made since you bought/built this house and for each one I'd like to know:

(a) When you did the work; (b) whether it was done for rental purposes; (c) the cost of the materials; (d) the cost of the labor; (e) how many man-days of unpaid labor were spent; (f) how you financed the work; and (g) whether you got any money from remittance.

	(a) YEAR DONE	(b) FOR RENTAL PURPOSE		(c) COST OF MATERIALS	(d) COST OF LABOR	(e) MAN-DAYS UNPAID LABOR	(f) SOURCE OF FINANCE	(g) MONEY FROM REMITTANCE	
		YES	NO					YES	NO
INSTALLATION OF SEPARATE ENTRANCE									
ADDED NEW UNIT WITH KITCHEN									
ADDED KITCHEN									
ADDED BATHROOM									
ADDED STORAGE ROOM									
ADDED OTHER ROOM(S)									
ENLARGEMENT OF BEDROOM									
ENLARGEMENT OF DINING ROOM									
ENLARGEMENT OF LIVING ROOM									
ENLARGEMENT OF KITCHEN									
ENLARGEMENT OF BATHROOM									
MODERNIZATION OF KITCHEN/BATHROOM									
MODERNIZATION OF INTERIOR									
EXTERIOR FACADE IMPROVEMENT									
ADDED A NEW GARDEN									

XV. INTENT TO MOVE

- | | | |
|--|-----------------|---|
| 1. Do you plan to move to another house within the next twelve months? | YES, DEFINITELY | 1 |
| | YES, PROBABLY | 2 |
| | POSSIBLY | 3 |
| | NO | 4 |

IF POSSIBLY OR NO, SKIP TO NEXT SECTION, PAGE 46.

2. Why are you planning to move?

PROBE: What is it you don't like about this place? _____

PROBE: What in particular are you looking for in a new place? _____

	1ST REASON	2ND REASON	3RD REASON
Moving to place I own	1	2	3
Moving to safer place	1	2	3
Moving to cheaper place	1	2	3
Moving to larger place	1	2	3
Moving to healthy place	1	2	3
Moving to better social environment	1	2	3
Getting closer to schools	1	2	3
Getting closer to workplace	1	2	3
Administrative eviction	1	2	3
Official ruling to vacate dwelling	1	2	3
Other (specify)	1	2	3

3. Where do you want to move to? PROBE IF UNCLEAR: URBAN 1
Is that urban or rural? RURAL 2

RECORD PLACE: _____

4. How many people would be living in your new house?.....

5. How many rooms would you like your house to have?.....

6. And how many bedrooms?.....

7. What kind of water supply would you like the house to have?
- | | |
|---------------|---|
| PIPED INSIDE | 1 |
| PIPED OUTSIDE | 2 |
| WELL | 3 |
| OTHER | 4 |

8. And what kind of toilet facilities would you like?
- | | |
|--------------|---|
| WC - INSIDE | 1 |
| WC - OUTSIDE | 2 |
| PIT | 3 |
| OPEN AIR | 4 |

9. What area do you want to move to: PROBE IF UNCLEAR: URBAN 1
Is that urban or rural? RURAL 2

RECORD PLACE: _____

10. Do you plan to rent or buy?..... RENT 1
BUY 2

11. Why do you plan to rent/buy?

IF PLANS TO RENT, SKIP TO Q. 14.

12. About how much do you expect your new house
to cost?.....

--	--	--	--	--	--

13. And how will you finance it?.....

MORTGAGE	1
CASH	2
LOAN	3
GIFT	4
OTHER	5

SKIP TO NEXT PAGE.

14. About how much do you expect to pay for
rent for your new unit?.....

--	--	--	--	--	--

15. If financing were available, would you buy instead of rent?

YES	NO
1	2

XVI. HOUSEHOLD INCOME AND EXPENDITURES

These last questions are about your income and expenses.

1. How much income did your household receive last month from the head of household's earnings?.....

--	--	--	--	--	--

ENTER "0" IF NO INCOME.

2. And how much income from other members' earnings?.....

--	--	--	--	--	--

ENTER "0" IF NO INCOME.

3. Did this household receive any income from rent? How much?.....

--	--	--	--	--	--

ENTER "0" IF NO INCOME FROM RENT

4. Did your household receive any gifts or money last month? How much?.....

--	--	--	--	--	--

ENTER "0" IF NO GIFTS

5. What about pensions or other payments from the government or an employer-- did your household receive any of this kind of income?.....

--	--	--	--	--	--

ENTER "0" IF NONE

6. **ADD TOTAL AND SAY:** Then your monthly income was about _____, is that right?
TOTAL INCOME.....

--	--	--	--	--	--

CODES FOR QUESTIONS: LESS THAN ONE MONTHS' INCOME = 1
 ONE TO TWO MONTHS' INCOME = 2
 THREE TO SIX MONTHS' INCOME = 3
 MORE THAN SIX MONTHS' INCOME = 4

	YES	NO	AMT. CODE
Do you have any cash savings? IF YES: Would that be about a month's income, or more or less? IF MORE: More than three or six months?.....	1	2	<input type="checkbox"/>
Do you have any savings in financial institutions? IF YES: Would that be about a month's income, or more or less? IF MORE: More than three or six months?.....	1	2	<input type="checkbox"/>
Do you have any savings in the form of pensions? IF YES: Would that be about a month's income, or more or less? IF MORE: More than three or six months?.....	1	2	<input type="checkbox"/>
Do you have any savings in mandatory contribution schemes? IF YES: Would that be about a month's income, or more or less? IF MORE: More than three or six months?.....	1	2	<input type="checkbox"/>
Do you have any outstanding loans to people? IF YES: Would that be about a month's income, or more or less? IF MORE: More than three or six months?.....	1	2	<input type="checkbox"/>

	YES	NO
(Besides this house) Do you own any residential property?..	1	2
Do you own any commerical property?.....	1	2
Do you own any other kind of property?.....	1	2

Now I'm going to read a list of things that you may or may not own, and I'd like you to tell me how many of each of them you own:

	NUMBER
Air conditioners.....	<input type="checkbox"/>
Televisions.....	<input type="checkbox"/>
Refrigerators or freezers..	<input type="checkbox"/>
Telephones.....	<input type="checkbox"/>
Automobiles.....	<input type="checkbox"/>
Motorcycles.....	<input type="checkbox"/>
Stereos.....	<input type="checkbox"/>
Radios.....	<input type="checkbox"/>

7. Finally, I'd like you to think about your expenses last month.
About how much did your household spend last month for:

Food?.....						
Meals eaten outside the house?...						
Clothing?.....						
Transportation?.....						
Fuel for heating?.....						
Fuel for cooking?.....						
Furniture?.....						
Education?.....						
Doctor and medicine?.....						
Hire purchase?.....						
Taxes?.....						
Payment for house purchase?.....						
Rent?.....						
Payment for house construction and/or maintenance?.....						
Water?.....						
Electricity?.....						
Garbage collection?.....						
Gifts or loans to friends or relatives?.....						
Entertainment?.....						
Loan repayments?.....						
Savings?.....						
Did your household have any other major expense last month? How much?.....						

THANK RESPONDENT AND TERMINATE INTERVIEW.

TIME INTERVIEW ENDED: _____ **am/pm.**