



Feed the Future Malawi Zone of Influence Interim Survey Questionnaire

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MODULE A. Household Identification Cover Sheet

HOUSEHOLD IDENTIFICATION	CODE	A09. INTERVIEWER VISITS		
		1	2	3
A01. HOUSEHOLD IDENTIFICATION	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
A02. CLUSTER NUMBER	<input type="text"/>	<input type="text"/>	<input type="text"/>	DAY MONTH YEAR
A03. VILLAGE	<input type="text"/>	<input type="text"/>	<input type="text"/>	INT. NUMBER RESULT
A04. T/TOWN	<input type="text"/>	<input type="text"/>	<input type="text"/>	TOTAL NUMBER OF VISITS
A05. DISTRICT	<input type="text"/>	<input type="text"/>	<input type="text"/>	
A06. REGION	<input type="text"/>	<input type="text"/>	<input type="text"/>	
A07. GPS COORDINATES OF HOUSEHOLD	<input type="text"/>	<input type="text"/>	<input type="text"/>	
<p>NOTE:</p> <p>THE PRIMARY MALE AND PRIMARY FEMALE DECISIONMAKERS ARE THOSE WHO ARE AGE 18 OR OLDER, AND WHO <u>SELF-IDENTIFY</u> AS THE PRIMARY MALE AND/OR PRIMARY FEMALE MEMBERS RESPONSIBLE FOR THE DECISION MAKING, BOTH SOCIAL AND ECONOMIC, WITHIN THE HOUSEHOLD.</p> <p>IN HOUSEHOLDS WITH BOTH MALE AND FEMALE DECISIONMAKERS, THE PRIMARY MALE AND PRIMARY FEMALE DECISIONMAKERS ARE USUALLY HUSBAND AND WIFE; HOWEVER THEY CAN ALSO BE OTHER HOUSEHOLD MEMBERS, AS LONG AS THEY ARE AGED 18 AND OVER.</p>		<p>DATE</p> <p>INTERVIEWER'S NAME</p> <p>RESULT*</p> <p>NEXT VISIT DATE TIME</p> <p>*RESULT CODES: 1 COMPLETED 2 NOT HOME 3 ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD 4 POSTPONED/UNAVAILABLE 5 REFUSED 6 DWELLING VACANT 7 NOT A DWELLING 8 DWELLING DESTROYED 9 DWELLING NOT FOUND 10 TOO ILL TO RESPOND/COGNITIVELY IMPAIRED 11 OTHER (SPECIFY) 12 PARTIAL COMPLETE</p>		
		<p>A10. TOTAL PERSONS IN HOUSEHOLD</p> <p>A11. TOTAL NUMBER OF WOMEN 15-49</p> <p>A12. TOTAL NUMBER OF CHILDREN AGE 0-5</p> <p>A13. LINE NO. OF RESPONDENT TO MODULE C</p>		
		<p>A14. SENIOR SUPERVISOR</p> <p>A15. QC INTERVIEWER</p> <p>A16. INTERVIEWER CODE</p> <p>NAME <input type="text"/> <input type="text"/> <input type="text"/> NAME <input type="text"/> <input type="text"/> <input type="text"/></p>		
		<p>A17. LANGUAGE OF QUESTIONNAIRE** <input type="text"/> A19. NATIVE LANGUAGE OF RESPONDENT** <input type="text"/></p> <p>A18. LANGUAGE OF INTERVIEW** <input type="text"/> A20. WAS A TRANSLATOR USED? (YES=1, NO=2) <input type="text"/></p> <p>** LANGUAGE CODES: 1 CHICHEWA 2 YAO 3 TUMBUKA 4 LOMWE 5 NGONI 6 SENA 7 OTHER (SPECIFY)</p>		

MODULE B(1). Informed Consent

INTRODUCE THE HOUSEHOLD TO THE SURVEY AND OBTAIN THE CONSENT OF A RESPONSIBLE ADULT IN THE HOUSEHOLD TO PARTICIPATE IN MODULES C & D OF THE QUESTIONNAIRE.

AT THE BEGINNING OF EACH SUBSEQUENT MODULE, YOU WILL BE PROMPTED TO OBTAIN INFORMED CONSENT FROM EACH ELIGIBLE RESPONDENT PRIOR TO INTERVIEWING HIM OR HER.

ASK TO SPEAK WITH A RESPONSIBLE ADULT IN THE HOUSEHOLD:

STATEMENT TO BE READ TO THE RESPONDENT:

Thank you for the opportunity to speak with you. We are a research team from the National Statistical Office. We are conducting a survey to learn about agriculture, food security, food consumption, nutrition and wellbeing of households in this area. Your household has been selected to participate in an interview that includes questions on topics such as your family background, dwelling characteristics, household expenditures and assets, food consumption and nutrition of women and children. The survey includes questions about the household generally, and questions about individuals within your household, if applicable. The questions about the household and its characteristics will take about 30 minutes to complete. If additional questions are relevant for members of your household, the interview in total will take approximately 2-3 hours to complete. Your participation is entirely voluntary. If you agree to participate, you can choose to stop at any time or skip any questions you do not want to answer. Your answers will be completely confidential; we will not share information that identifies you with anyone. After entering the questionnaire into a data base, we will destroy all information such as your name that could link these responses to you.

Do you have any questions about the survey or what I have said? If in the future you have any questions regarding the survey or the interview, or concerns or complaints we welcome you to contact the National Statistical Office, by calling +265884331492. We will leave a copy of this statement and our organization's complete contact information with you so that you may contact us at any time.

**Do you have any questions?
May I begin the interview now?**

SIGNATURE OF INTERVIEWER: _____ DATE: _____

RESPONDENT AGREES TO BE INTERVIEWED ...1



CONTINUE
WITH
HOUSEHOLD
ROSTER:

RESPONDENT DOES NOT AGREE TO BE INTERVIEWED2 → END. "Thank you very much for your time."

"First, I'd like to ask you about the members of your household."

MODULE B(2). Informed Consent and Contact Information

To Leave with the Household

Thank you for the opportunity to speak with you. We are a research team from the National Statistical Office. We are conducting a survey to learn about agriculture, food security, food consumption, nutrition and wellbeing of households in this area. Your household has been selected to participate in an interview that includes questions on topics such as your family background, dwelling characteristics, household expenditures and assets, food consumption and nutrition of women and children. The survey includes questions about the household generally, and questions about individuals within your household, if applicable. The questions about the household and its characteristics will take about 30 minutes to complete. If additional questions are relevant for members of your household, the interview in total will take approximately 2-3 hours to complete. Your participation is entirely voluntary. If you agree to participate, you can choose to stop at any time or skip any questions you do not want to answer. Your answers will be completely confidential; we will not share information that identifies you with anyone. After entering the questionnaire into a data base, we will destroy all information such as your name that could link these responses to you.

If in the future you have any questions regarding the survey or the interview, or concerns or complaints, we welcome you to contact the National Statistical Office, by calling +265884331492. This form is for you so that you will have a record of your participation in the study, and the contact information for the survey organization.

NAME OF SURVEY IMPLEMENTING ORGANIZATION: The National Statistical Office

NAME OF SURVEY DIRECTOR: Tiipe Mleme
PHONE NUMBER: +265884331492
MAILING ADDRESS: National Statistical Office
P.O. Box 333
Zomba, Malawi
EMAIL ADDRESS: tmleme@yahoo.co.uk

MODULE C. Household Roster and Demographics

Household identification (in data file, each module must be matched with the HH ID)

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C01a. Who would you say is the primary male decisionmaker in this household? This person should be 18 years old or older.

YES, PRIMARY MALE DECISIONMAKER EXISTS IN HOUSEHOLD1
 NO PRIMARY MALE DECISIONMAKER IN HOUSEHOLD2

IF THERE IS A PRIMARY MALE DECISIONMAKER, ENTER HIS NAME ON LINE 01 OF THE ROSTER. C02 AND C03 ARE PRE-FILLED FOR THIS LINE NUMBER.

C01b. Who would you say is the primary female decisionmaker in this household? This person should be 18 years old or older.

YES, PRIMARY FEMALE DECISIONMAKER EXISTS IN HOUSEHOLD1
 NO PRIMARY FEMALE DECISIONMAKER IN HOUSEHOLD2

IF THERE IS A PRIMARY FEMALE DECISIONMAKER, ENTER HER NAME ON LINE 02 OF THE ROSTER. SEX (C02) IS PRE-FILLED FOR THIS LINE NUMBER. ENTER THE RELATIONSHIP (C03) OF THE FEMALE DECISIONMAKER TO THE PERSON LISTED ON LINE 01; IF NO ONE IS LISTED ON LINE 01, ENTER CODE '01' FOR C03.

L I N E N U M B E R	Now, please tell me the names of all of the other people who usually live here. LIST ALL HOUSEHOLD MEMBERS, THEIR SEX (C02), AND THEIR RELATIONSHIP TO THE PRIMARY DECISIONMAKER NAMED IN LINE 01 (C03), OR NAMED IN LINE 02 IF NO HH MEMBER LISTED ON LINE 01. IF THERE IS NO PRIMARY MALE OR FEMALE DECISIONMAKER IN THE HOUSEHOLD, START THE HOUSEHOLD LISTING ON LINE 03. THEN ASK: Are there any other people who live here, even if they are not at home now? These may include children in school or household members at work. Any other people like small children or infants that we have not listed? Are there any other people who may not be members of your family, such as domestic servants, lodgers, or friends who usually live here? IF YES, COMPLETE LISTING FOR QUESTIONS C02-C03. THEN, ASK QUESTIONS STARTING WITH C04 FOR EACH PERSON ONE AT A TIME.	What is [NAME's] relationship to the primary male decision-maker? IF NO PRIMARY MALE DECISION-MAKER: What is [NAME's] relationship to the primary female decision-maker? SEE CODES BELOW	What is [NAME's] age? IN YEARS IF 95 OR OLDER, ENTER '95'	Did [NAME] stay here last night? YES=1 NO=2	How long has it been since [NAME] has spent the night in this household? SEE CODES BELOW	CIRCLE LINE NUMBER OF ALL WOMEN AGE 15-49	CIRCLE LINE NUMBER OF ALL CHILDREN AGE 0-5	Has [NAME] ever attended school? YES=1 NO=2	Is [NAME] currently attending school? YES=1 NO=2	What is the highest grade of education completed by [NAME]? SEE CODES BELOW	Can [NAME] read and write? SEE CODES BELOW	
	C01	C02	C03	C04	C05	C06	C07	C08	C09	C10	C11	C12
	01	1	0 1	1→C07 2	1 2 3	1 2 3	01	01	1 2→C12	1 2		
02	2		1→C07 2	1 2 3	1 2 3	02	02	1 2→C12	1 2			
03	1 2		1→C07 2	1 2 3	1 2 3	03	03	1 2→C12	1 2			
04	1 2		1→C07 2	1 2 3	1 2 3	04	04	1 2→C12	1 2			
05	1 2		1→C07 2	1 2 3	1 2 3	05	05	1 2→C12	1 2			
06	1 2		1→C07 2	1 2 3	1 2 3	06	06	1 2→C12	1 2			
C03. RESULT CODES: RELATIONSHIP TO PRIMARY MALE (OR FEMALE, IF NO MALE) DECISIONMAKER: SELF 01 BROTHER/SISTER-IN-LAW 11 SPOUSE/PARTNER 02 MOTHER/FATHER-IN-LAW 12 SON/DAUGHTER 03 OTHER RELATIVE 13 SON/DAUGHTER-IN-LAW 04 SERVANT/MAID 14 GRANDSON/ LABORER 15 GRANDDAUGHTER 05 NO DECISIONMAKER MOTHER/FATHER 06 AGE 18 OR OLDER BROTHER/SISTER 07 IN HOUSEHOLD 16 NEPHEW/NIECE 08 STEPSON/ NEPHEW/NIECE OF SPOUSE 09 STEPDUGHTER 17 COUSIN 10 OTHER RELATIONSHIP 96			C06. RESULT CODES: TIME SINCE SPENT THE NIGHT CIRCLE 1 IF DAYS; ENTER # OF DAYS IN BOX (1-6) CIRCLE 2 IF WEEKS; ENTER # OF WEEKS IN BOX (1-5) CIRCLE 3 IF MONTHS; ENTER # OF MONTHS IN BOX MEMBER HAS BEEN AWAY.			C11. RESULT CODES: EDUCATION LESS THAN P1 (OR NO SCHOOL)01 PRIMARY LEVEL 102 PRIMARY LEVEL 203 PRIMARY LEVEL 304 PRIMARY LEVEL 405 PRIMARY LEVEL 506 PRIMARY LEVEL 607 PRIMARY LEVEL 708 PRIMARY LEVEL 809 SECONDARY 110 SECONDARY 211 SECONDARY 312 SECONDARY 413			A-LEVEL/HIGH SCHOOL14 UNIVERSITY OR ABOVE15 TECHNICAL/VOCATIONAL16 ADULT LITERACY ONLY, NO FORMAL EDUCATION17 KORANIC/RELIGIOUS ONLY NO FORMAL EDUCATION)18 DON'T KNOW/NOT APPLICABLE 91 C12. RESULT CODES: LITERACY CANNOT READ & WRITE1 CAN SIGN (WRITE) ONLY2 CAN READ ONLY3 CAN READ & WRITE4			

Household identification (in data file, each module must be matched with the HH ID)

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L I N E N U M B E R	Now, please tell me the names of all of the other people who usually live here. LIST ALL HOUSEHOLD MEMBERS, THEIR SEX (C02), AND THEIR RELATIONSHIP TO THE PRIMARY DECISIONMAKER NAMED IN LINE 01 (C03), OR NAMED IN LINE 02 IF NO HH MEMBER LISTED ON LINE 01. IF THERE IS NO PRIMARY MALE OR FEMALE DECISIONMAKER IN THE HOUSEHOLD, START THE HOUSEHOLD LISTING ON LINE 03. THEN ASK: Are there any other people who live here, even if they are not at home now? These may include children in school or household members at work. Any other people like small children or infants that we have not listed? Are there any other people who may not be members of your family, such as domestic servants, lodgers, or friends who usually live here? IF YES, COMPLETE LISTING FOR QUESTIONS C02-C03. THEN, ASK QUESTIONS STARTING WITH C04 FOR EACH PERSON, ONE AT A TIME.	What is [NAME's] relationship to the primary male decision-maker? IF NO PRIMARY MALE DECISIONMAKER: What is [NAME's] relationship to the primary female decision-maker? SEE CODES BELOW	What is [NAME's] sex? M = 1 F = 2	What is [NAME's] age? IN YEARS IF 95 OR OLDER, ENTER '95'	Did [NAME] stay here last night? YES=1 NO=2	How long has it been since [NAME] has spent the night in this household? SEE CODES BELOW	CIRCLE LINE NUMBER OF ALL WOMEN AGE 15-49	CIRCLE LINE NUMBER OF ALL CHILDREN AGE 0-5	Has [NAME] ever attended school? YES=1 NO=2	Is [NAME] currently attending school? YES=1 NO=2	What is the highest grade of education completed by [NAME]? SEE CODES BELOW	Can [NAME] read and write? SEE CODES BELOW			
	C01	C02	C03	C04	C05	C06	C07	C08	C09	C10	C11	C12			
	07	1 2			1→C07 2	1 2 3	07	07	1 2→C12	1 2					
	08	1 2			1→C07 2	1 2 3	08	08	1 2→C12	1 2					
	09	1 2			1→C07 2	1 2 3	09	09	1 2→C12	1 2					
	10	1 2			1→C07 2	1 2 3	10	10	1 2→C12	1 2					
	11	1 2			1→C07 2	1 2 3	11	11	1 2→C12	1 2					
	12	1 2			1→C07 2	1 2 3	12	12	1 2→C12	1 2					
	13	1 2			1→C07 2	1 2 3	13	13	1 2→C12	1 2					
	14	1 2			1→C07 2	1 2 3	14	14	1 2→C12	1 2					
15	1 2			1→C07 2	1 2 3	15	15	1 2→C12	1 2						
C03. RESULT CODES: RELATIONSHIP TO PRIMARY MALE (OR FEMALE, IF NO MALE) DECISIONMAKER: SELF.....01 BROTHER/SISTER-IN-LAW...11 SPOUSE/PARTNER.....02 MOTHER/FATHER-IN-LAW....12 SON/DAUGHTER.....03 OTHER RELATIVE13 SON/DAUGHTER-IN-LAW04 SERVANT/MAID.....14 GRANDSON/LABORER15 GRANDDAUGHTER.....05 NO DECISIONMAKER MOTHER/FATHER06 AGE 18 OR OLDER BROTHER/SISTER.....07 IN HOUSEHOLD16 NEPHEW/NIECE.....08 STEPSON/ NEPHEW/NIECE OF SPOUSE.....09 STEPDAUGHTER.....17 COUSIN.....10 OTHER RELATIONSHIP96				C06. RESULT CODES: TIME SINCE HOME CIRCLE 1 IF DAYS; ENTER # OF DAYS IN BOX (1-6) CIRCLE 2 IF WEEKS; ENTER # OF WEEKS IN BOX (1-5) CIRCLE 3 IF MONTHS; ENTER # OF MONTHS IN BOX MEMBER HAS BEEN AWAY				C11. RESULT CODES: EDUCATION LESS THAN P1 (OR NO SCHOOL).....01 PRIMARY LEVEL 102 PRIMARY LEVEL 203 PRIMARY LEVEL 304 PRIMARY LEVEL 405 PRIMARY LEVEL 506 PRIMARY LEVEL 607 PRIMARY LEVEL 708 PRIMARY LEVEL 809 SECONDARY 110 SECONDARY 211 SECONDARY 312 SECONDARY 413				A-LEVEL/HIGH SCHOOL.....14 UNIVERSITY OR ABOVE15 TECHNICAL/VOCATIONAL16 ADULT LITERACY ONLY, NO FORMAL EDUCATION17 KORANIC/RELIGIOUS ONLY NO FORMAL EDUCATION).....18 DON'T KNOW/ NOT APPLICABLE91 C12. RESULT CODES: LITERACY CANNOT READ & WRITE.....1 CAN SIGN (WRITE) ONLY.....2 CAN READ ONLY3 CAN READ & WRITE4			

MODULE D. Dwelling Characteristics

Household identification (in data file, each module must be matched with the HH ID)

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CONTINUE INTERVIEWING THE SAME RESPONDENT FROM MODULE C.
 "Now I'd like to ask you a few questions about your home."

QNO.	QUESTIONS	RESPONSE CODES
D01	OBSERVE (DO NOT ASK) ROOF TOP MATERIAL (OUTER COVERING):	<p>D01:TYPE OF ROOF</p> <p>NATURAL ROOFING NO ROOF.....11 THATCH/PALM LEAF.....12 SOD.....13 RUDIMENTARY ROOFING RUSTIC MAT.....21 PALM/BAMBOO.....22 WOOD PLANKS.....23 CARDBOARD.....24</p> <p>FINISHED ROOFING METAL.....31 WOOD.....32 CALAMINE/CEMENT FIBER.....33 CERAMIC TILES.....34 CEMENT.....35 ROOFING SHINGLES.....36 OTHER.....96</p>
D02	OBSERVE (DO NOT ASK) FLOOR MATERIAL:	<p>D02:TYPE OF FLOOR</p> <p>NATURAL FLOOR EARTH/SAND.....11 DUNG.....12 RUDIMENTARY FLOOR WOOD PLANKS.....21 PALM/BAMBOO.....22</p> <p>FINISHED FLOOR PARQUET/POLISHED WOOD.....31 VINYL OR ASPHALT STRIPS.....32 CERAMIC TILES.....33 CEMENT.....34 CARPET.....35 OTHER.....96</p>
D03	OBSERVE (DO NOT ASK) EXTERIOR WALLS:	<p>D03:TYPE OF WALLS</p> <p>NATURAL WALLS NO WALLS.....11 CANE/PALM/TRUNKS.....12 DIRT.....13 RUDIMENTARY WALLS BAMBOO WITH MUD.....21 STONE WITH MUD.....22 UNCOVERED ADOBE.....23 PLYWOOD.....24 CARDBOARD.....25 REUSED WOOD.....26 METAL SHEETING.....27</p> <p>FINISHED WALLS CEMENT.....31 STONE WITH LIME/CEMENT.....32 BRICKS.....33 CEMENT BLOCKS.....34 COVERED ADOBE.....35 WOOD PLANKS/SHINGLES.....36 OTHER.....96</p>

QNO.	QUESTIONS	RESPONSE CODES
D04	How many rooms in this dwelling are used for sleeping?	<p>D04: NUMBER OF ROOMS USED FOR SLEEPING: <input type="text"/></p>
D05	What is the main type of toilet your household uses?	<p>D05: TYPE OF TOILET</p> <ul style="list-style-type: none"> FLUSH OR POUR FLUSH TOILET FLUSH TO PIPED SEWER SYSTEM 11 FLUSH TO SEPTIC TANK..... 12 FLUSH TO PIT LATRINE..... 13 FLUSH TO SOMEWHERE ELSE 14 FLUSH, DON'T KNOW WHERE..... 15 PIT LATRINE VENTILATED IMPROVED PIT LATRINE (VIP)..... 21 PIT LATRINE WITH NATURALSLAB 22 PIT LATRINE WITH MANUFACTURED SLAB (SANPLAT) 23 PIT LATRINE WITHOUT SLAB/OPEN PIT 24 COMPOSTING TOILET 31 BUCKET TOILET 41 HANGING TOILET/HANGING LATRINE (PILE) 51 NO FACILITY/BUSH/FIELD/LAKE/RIVER 61 → SKIP TO D08 ECOSAN LATRINE 81 OTHER..... 96
D06	Do you share this toilet with other households?	<p>D06: IF TOILET IS SHARED</p> <ul style="list-style-type: none"> YES 1 NO 2 → SKIP TO D08
D07	How many households use this toilet?	<p>D07: NUMBER OF HOUSEHOLDS WITH WHOM TOILET IS SHARED</p> <p>NUMBER OF HOUSEHOLDS (IF LESS THAN 10) <input type="text" value="0"/></p> <p>10 OR MORE HOUSEHOLDS 95</p> <p>DON'T KNOW 98</p>

QNO.	QUESTIONS	RESPONSE CODES
D08	What is the main source of drinking water for your household?	D08: MAIN DRINKING WATER SOURCE PIPED WATER PIPED INTO DWELLING11 PIPED TO YARD/PLOT12 PUBLIC TAP/STANDPIPE13 TUBE WELL OR BOREHOLE21 DUG WELL PROTECTED WELL.....31 UNPROTECTED WELL32 WATER FROM SPRING PROTECTED SPRING.....41 UNPROTECTED SPRING42 RAINWATER.....51 TANKER TRUCK.....61 CART WITH SMALL TANK71 SURFACE WATER (RIVER/DAM/LAKE/ POND/STREAM/CANAL/ IRRIGATION CHANNEL)81 BOTTLED WATER.....91 OTHER.....96
D09	Does this household have electricity?	D09: ELECTRICITY YES1 NO2
D10	What is the main source of cooking fuel for your household?	D10: COOKING FUEL ELECTRICITY01 LIQUID PROPANE GAS02 NATURAL GAS.....03 BIOGAS04 KEROSENE05 COAL, LIGNITE06 CHARCOAL07 WOOD08 STRAW/SHRUBS/GRASS09 AGRICULTURAL CROP RESIDUE.....10 ANIMAL DUNG11 NO FOOD COOKED IN HOUSEHOLD...95 OTHER96

MODULE E. Household Consumption Expenditure

Household identification (in data file, each module must be matched with the HH ID)

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ASK THESE QUESTIONS ABOUT ALL HOUSEHOLD MEMBERS. FOR MODULE E1, ASK WHOEVER IS MOST KNOWLEDGEABLE ABOUT THE FOOD THE HOUSEHOLD MEMBERS HAVE EATEN IN THE PAST WEEK. FOR MODULES E2 THROUGH E7, ASK THE PERSON WHO IS MOST KNOWLEDGEABLE ABOUT OTHER HOUSEHOLD EXPENDITURES, INCLUDING NON-FOOD ITEMS THAT HOUSEHOLD MEMBERS HAVE BOUGHT.

CHECK THE INFORMED CONSENT REGISTER AND ENSURE THAT THE RESPONDENT(S) TO MODULE E HAS PREVIOUSLY PROVIDED INFORMED CONSENT; IF NOT, ADMINISTER THE MODULE E INFORMED CONSENT PROCEDURE (ANNEX 3) TO THE RESPONDENT.

"Now I would like to ask you about the kinds of foods that you and other members of your household have eaten over the past week. I'd also like to ask you about items that you or members of your household may have bought in the past week. Please include foods in meals that are shared with other members of the household, as well as foods that individual members of the household may have consumed independently of other family members. First we will ask about foods that were eaten at your home, or at the home of friends or other family. Later we will ask about foods that were purchased already prepared from a restaurant or a vendor."

MODULE E1. Food Consumption Over Past 7 Days

FOOD ITEM	ITEM CODE	Over the past 7 days, did you or others in your household eat any [FOOD ITEM]?	How much in total did your household eat in the past week?		How much of what you ate came from purchases?		How much did you spend on what was eaten last week? if your family ate part but not all of something you purchased, estimate what you spent only on the part that was consumed.		How much of what you ate came from your household's own production?		CHECK E1.06A. IF E1.06A IS > 0, ASK: "Please tell me how much it would have cost to buy that much [FOOD ITEM] if you had to purchase it in the market today."		CHECK E1.07A. IF E1.07A IS > 0, ASK: "Please tell me how much it would have cost to buy that much [FOOD ITEM] if you had to purchase it in the market today."	
			E1.03A QUANTITY	E1.03B UNIT	E1.04A QUANTITY	E1.04B UNIT	E1.05 (MK)	E1.06A QUANTITY	E1.06B UNIT	E1.06C ESTIMATE (MK)	E1.07A QUANTITY	E1.07B UNIT	E1.07C ESTIMATE (MK)	
Cereals, Grains and Cereal Products	01-20													
Maize (normal flour)	01	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM												
Maize, refined (fine flour)	02	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM												
Maize (bran flour)	03	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM												
Maize grain (not flour)	04	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM												
Green maize	05	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM												
Rice	06	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM												
Finger millet	07	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM												
Sorghum	08	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM												

FOOD ITEM	ITEM CODE	Over the past 7 days, did you or others in your household eat any [FOOD ITEM]?	How much in total did your household eat in the past week?		How much of what you ate came from purchases?		How much did you spend on what was eaten last week?		How much of what you ate came from your household's own production?		CHECK E1.06A. IF E1.06A IS > 0, ASK: "Please tell me how much it would have cost to buy that much [FOOD ITEM] if you had to purchase it in the market today."		CHECK E1.07A. IF E1.07A IS > 0, ASK: "Please tell me how much it would have cost to buy that much [FOOD ITEM] if you had to purchase it in the market today."	
			E1.03A QUANTITY	E1.03B UNIT	E1.04A QUANTITY	E1.04B UNIT	E1.05 (MK)	E1.06A QUANTITY	E1.06B UNIT	E1.06C ESTIMATE (MK)	E1.07A QUANTITY	E1.07B UNIT	E1.07C ESTIMATE (MK)	
E1.01														
Pearl millet	09	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM												
Wheat flour	10	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM												
Bread	11	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM												
Buns, scones	12	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM												
Biscuits	13	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM												
Spaghetti, macaroni, pasta	14	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM												
Breakfast cereal	15	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM												
Infant feeding cereals	16	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM												

FOOD ITEM	ITEM CODE	Over the past 7 days, did you or others in your household eat any [FOOD ITEM]?	How much in total did your household eat in the past week?		How much of what you ate came from purchases?		How much did you spend on what was eaten last week? If your family ate part but not all of something you purchased, estimate what you spent only on the part that was consumed.		How much of what you ate came from your household's own production?		CHECK E1.06A. IF E1.06A IS > 0, ASK: "Please tell me how much it would have cost to buy that much [FOOD ITEM] if you had to purchase it in the market today."		CHECK E1.07A. IF E1.07A IS > 0, ASK: "Please tell me how much it would have cost to buy that much [FOOD ITEM] if you had to purchase it in the market today."	
			E1.03A QUANTITY	E1.03B UNIT	E1.04A QUANTITY	E1.04B UNIT	E1.05 (MK)	E1.06A QUANTITY	E1.06B UNIT	E1.06C ESTIMATE (MK)	E1.07A QUANTITY	E1.07B UNIT	E1.07C ESTIMATE (MK)	
Roots, Tubers & Plantains														
21-35														
Cassava tubers	21	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Cassava flour	22	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
White sweet potato	23	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Orange sweet potato	24	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Irish potato	25	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Potato crisps	26	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Plantain, cooking banana	27	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Cocoyam	28	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												

FOOD ITEM	ITEM CODE	Over the past 7 days, did you or others in your household eat any [FOOD ITEM]?	E1.03A		E1.03B		E1.04A		E1.04B		E1.05		E1.06A		E1.06B		E1.06C		E1.07A		E1.07B		E1.07C		
			QUANTITY	UNIT	QUANTITY	UNIT	QUANTITY	UNIT	QUANTITY	UNIT	QUANTITY	UNIT	QUANTITY	UNIT	QUANTITY	UNIT	QUANTITY	UNIT	ESTIMATE (MK)	QUANTITY	UNIT	ESTIMATE (MK)	QUANTITY	UNIT	ESTIMATE (MK)
E1.01			E1.02																						
Nuts and Pulses																									
	36-50																								
Bean, white	36	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM																							
Bean, brown	37	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM																							
Pigeonpea	38	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM																							
Groundnut	39	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM																							
Groundnut flour	40	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM																							
Soyabean flour	41	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM																							

FOOD ITEM	ITEM CODE	Over the past 7 days, did you or others in your household eat any [FOOD ITEM]?	How much in total did your household eat in the past week?		How much of what you ate came from purchases?		How much did you spend on what was eaten last week?		How much of what you ate came from your household's own production?		CHECK E1.06A. IF E1.06A IS > 0, ASK: "Please tell me how much it would have cost to buy that much [FOOD ITEM] if you had to purchase it in the market today."		CHECK E1.07A. IF E1.07A IS > 0, ASK: "Please tell me how much it would have cost to buy that much [FOOD ITEM] if you had to purchase it in the market today."	
			E1.03A QUANTITY	E1.03B UNIT	E1.04A QUANTITY	E1.04B UNIT	E1.05 (MK)	E1.06A QUANTITY	E1.06B UNIT	E1.06C ESTIMATE (MK)	E1.07A QUANTITY	E1.07B UNIT	E1.07C ESTIMATE (MK)	
Ground bean	42	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Cowpea	43	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Macademia nuts	44	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Vegetables	51-70													
Onion, fresh or processed	51	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Cabbage, fresh or processed	52	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Rape, fresh or processed	53	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Nkhwari, fresh or processed	54	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Chinese cabbage, fresh or processed	55	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												

FOOD ITEM	ITEM CODE	Over the past 7 days, did you or others in your household eat any [FOOD ITEM]?	How much in total did your household eat in the past week?		How much of what you ate came from purchases?		How much did you spend on what was eaten last week?		How much of what you ate came from your household's own production?		CHECK E1.06A. IF E1.06A IS > 0, ASK: "Please tell me how much it would have cost to buy that much [FOOD ITEM] if you had to purchase it in the market today."		CHECK E1.07A. IF E1.07A IS > 0, ASK: "Please tell me how much it would have cost to buy that much [FOOD ITEM] if you had to purchase it in the market today."	
			E1.03A QUANTITY	E1.03B UNIT	E1.04A QUANTITY	E1.04B UNIT	E1.05 (MK)	E1.06A QUANTITY	E1.06B UNIT	E1.06C ESTIMATE (MK)	E1.07A QUANTITY	E1.07B UNIT	E1.07C ESTIMATE (MK)	
E1.01														
Other cultivated green leafy vegetables, fresh or processed	56	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Gathered wild green leaves	57	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Tomato, fresh or processed	58	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Cucumber, fresh or processed	59	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Pumpkin, fresh or processed	60	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Okra, fresh or processed	61	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Mushroom, fresh or processed	62	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Meat, Fish and Animal products	71-90													
Eggs	71	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												

FOOD ITEM	ITEM CODE	Over the past 7 days, did you or others in your household eat any [FOOD ITEM]?	How much in total did your household eat in the past week?		How much of what you ate came from purchases?		How much did you spend on what was eaten last week? If your family ate part but not all of something you purchased, estimate what you spent only on the part that was consumed.		How much of what you ate came from your household's own production?		CHECK E1.06A. IF E1.06A IS > 0, ASK: "Please tell me how much it would have cost to buy that much [FOOD ITEM] if you had to purchase it in the market today."		CHECK E1.07A. IF E1.07A IS > 0, ASK: "Please tell me how much it would have cost to buy that much [FOOD ITEM] if you had to purchase it in the market today."	
			E1.03A QUANTITY	E1.03B UNIT	E1.04A QUANTITY	E1.04B UNIT	E1.05 (MK)	E1.06A QUANTITY	E1.06B UNIT	E1.06C ESTIMATE (MK)	E1.07A QUANTITY	E1.07B UNIT	E1.07C ESTIMATE (MK)	
E1.01														
Dried fish	72	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Fresh fish	73	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Beef	74	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Goat	75	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Pork	76	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Mutton	77	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Chicken	78	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Guinea fowl, doves, pigeons, or other birds raised for meat or eggs	79	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												

FOOD ITEM	ITEM CODE	Over the past 7 days, did you or others in your household eat any [FOOD ITEM]?	How much in total did your household eat in the past week?		How much of what you ate came from purchases?		How much did you spend on what was eaten last week? If your family ate part but not all of something you purchased, estimate what you spent only on the part that was consumed.		How much of what you ate came from your household's own production?		CHECK E1.06A. IF E1.06A IS > 0, ASK: "Please tell me how much it would have cost to buy that much [FOOD ITEM] if you had to purchase it in the market today."		CHECK E1.07A. IF E1.07A IS > 0, ASK: "Please tell me how much it would have cost to buy that much [FOOD ITEM] if you had to purchase it in the market today."	
			E1.03A QUANTITY	E1.03B UNIT	E1.04A QUANTITY	E1.04B UNIT	E1.05 (MK)	E1.06A QUANTITY	E1.06B UNIT	E1.06C ESTIMATE (MK)	E1.07A QUANTITY	E1.07B UNIT	E1.07C ESTIMATE (MK)	
E1.01														
Small animal – rabbit, mice, etc.	80	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM												
Termites, other insects, for example caterpillar	81	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM												
Tinned meat or fish	82	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM												
Smoked fish	83	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM												
Fish Soup/Sauce	84	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM												
Fruits	91-110													
Mango	91	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM												
Banana	92	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM												
Citrus – naartjie, orange, etc.	93	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM												

FOOD ITEM	ITEM CODE	Over the past 7 days, did you or others in your household eat any [FOOD ITEM]?	How much in total did your household eat in the past week?		How much of what you ate came from purchases?		How much did you spend on what was eaten last week? If your family ate part but not all of something you purchased, estimate what you spent only on the part that was consumed.		How much of what you ate came from your household's own production?		CHECK E1.06A. IF E1.06A IS > 0, ASK: "Please tell me how much it would have cost to buy that much [FOOD ITEM] if you had to purchase it in the market today."		CHECK E1.07A. IF E1.07A IS > 0, ASK: "Please tell me how much it would have cost to buy that much [FOOD ITEM] if you had to purchase it in the market today."	
			E1.03A QUANTITY	E1.03B UNIT	E1.04A QUANTITY	E1.04B UNIT	E1.05 (MK)	E1.06A QUANTITY	E1.06B UNIT	E1.06C ESTIMATE (MK)	E1.07A QUANTITY	E1.07B UNIT	E1.07C ESTIMATE (MK)	
E1.01														
Pineapple	94	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Papaya	95	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Guava	96	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Avocado	97	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Wild fruit	98	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Apple	99	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Milk and Milk Products	111-125													
Fresh milk	111	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												
Powdered milk	112	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM												

FOOD ITEM	ITEM CODE	Over the past 7 days, did you or others in your household eat any [FOOD ITEM]?	E1.03A QUANTITY	E1.03B UNIT	How much of what you ate came from purchases?	E1.04A QUANTITY	E1.04B UNIT	How much did you spend on what was eaten last week? If your family ate part but not all of something you purchased, estimate what you spent only on the part that was consumed.	E1.05 (MK)	E1.06A QUANTITY	E1.06B UNIT	How much of what you ate came from your household's own production?	E1.06C ESTIMATE (MK)	E1.07A QUANTITY	E1.07B UNIT	CHECK E1.07A. IF E1.07A IS > 0, ASK: "Please tell me how much it would have cost to buy that much [FOOD ITEM] if you had to purchase it in the market today."	E1.07C ESTIMATE (MK)
Margarine – (e.g., Blue band)	113	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM															
Butter	114	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM															
Chambiko – soured milk	115	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM															
Yogurt	116	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM															
Cheese	117	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM															
Infant feeding formula (for bottle)	118	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM															
Sugar, Fats, and Oil	126-135																
Sugar	126	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM															
Sugar Cane	127	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM															

FOOD ITEM	ITEM CODE	Over the past 7 days, did you or others in your household eat any [FOOD ITEM]?	How much in total did your household eat in the past week?		How much of what you ate came from purchases?		How much did you spend on what was eaten last week?		How much of what you ate came from your household's own production?		How much of what you ate came from gifts or other sources?		CHECK E1.07A. IF E1.07A IS > 0, ASK: "Please tell me how much it would have cost to buy that much [FOOD ITEM] if you had to purchase it in the market today."
			E1.03A QUANTITY	E1.03B UNIT	E1.04A QUANTITY	E1.04B UNIT	E1.05 (MK)	E1.06A QUANTITY	E1.06B UNIT	E1.06C ESTIMATE (MK)	E1.07A QUANTITY	E1.07B UNIT	
E1.01													
Cooking oil	128	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM											
Beverages	136-155												
Tea	136	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM											
Coffee	137	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM											
Cocoa, Milo	138	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM											
Squash (Sobo drink concentrate)	139	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM											
Fruit juice	140	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM											
Freezes (flavoured ice)	141	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM											
Soft drinks (Coca-cola, Fanta, Sprite, etc.)	142	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM											

FOOD ITEM	ITEM CODE	Over the past 7 days, did you or others in your household eat any [FOOD ITEM]?	How much in total did your household eat in the past week?		How much of what you ate came from purchases?		How much did you spend on what was eaten last week? If your family ate part but not all of something you purchased, estimate what you spent only on the part that was consumed.		How much of what you ate came from your household's own production?		CHECK E1.06A. IF E1.06A IS > 0, ASK: "Please tell me how much it would have cost to buy that much [FOOD ITEM] if you had to purchase it in the market today."		CHECK E1.07A. IF E1.07A IS > 0, ASK: "Please tell me how much it would have cost to buy that much [FOOD ITEM] if you had to purchase it in the market today."	
			E1.03A QUANTITY	E1.03B UNIT	E1.04A QUANTITY	E1.04B UNIT	E1.05 (MK)	E1.06A QUANTITY	E1.06B UNIT	E1.06C ESTIMATE (MK)	E1.07A QUANTITY	E1.07B UNIT	E1.07C ESTIMATE (MK)	
E1.01														
Chibuku (commercial traditional-style beer)	143	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM												
Bottled drinking water	144	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM												
Maheu	145	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM												
Bottled / canned beer (Carlsberg, etc.)	146	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM												
Thobwa	147	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM												
Traditional beer	148	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM												
Wine or commercial liquor	149	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM												
Locally brewed liquor	150	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM												

FOOD ITEM	ITEM CODE	Over the past 7 days, did you or others in your household eat any [FOOD ITEM]?	E1.03A		E1.03B		E1.04A		E1.04B		E1.05		E1.06A		E1.06C		E1.07A		E1.07C	
			QUANTITY	UNIT	QUANTITY	UNIT	QUANTITY	UNIT	QUANTITY	UNIT	QUANTITY	UNIT	QUANTITY	UNIT	QUANTITY	UNIT	ESTIMATE (MIK)	QUANTITY	UNIT	ESTIMATE (MIK)
Spices & Miscellaneous																				
	156-170																			
Salt	156	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM																		
Spices	157	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM																		
Yeast, baking powder, bicarbonate of soda	158	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM																		
Tomato sauce (bottle)	159	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM																		
Hot sauce (Nali, etc.)	160	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM																		
Jam, jelly	161	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM																		
Sweets, candy, chocolates	162	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM																		
Honey	163	YES1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM																		

FOOD ITEM	ITEM CODE	Over the past 7 days, did you or others in your household eat any [FOOD ITEM]?	E1.03A QUANTITY	E1.03B UNIT	How much of what you ate came from purchases?	E1.04A QUANTITY	E1.04B UNIT	E1.05 (MK)	How much did you spend on what was eaten last week? If your family ate part but not all of something you purchased, estimate what you spent only on the part that was consumed.	E1.06A QUANTITY	E1.06B UNIT	E1.06C ESTIMATE (MK)	How much of what you ate came from gifts or other sources?	E1.07A QUANTITY	E1.07B UNIT	E1.07C ESTIMATE (MK)	CHECK E1.07A. IF E1.07A IS > 0, ASK: "Please tell me how much it would have cost to buy that much [FOOD ITEM] if you had to purchase it in the market today."	
E1.01			E1.02															
Peanut butter	164	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM																
Cooked Foods from Vendors																		
Maize – boiled or roasted (vendor)	171	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM																
Chips (vendor)	172	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM																
Cassava – boiled (vendor)	173	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM																
Eggs – boiled (vendor)	174	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM																
Chicken (vendor)	175	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM																
Meat (vendor)	176	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM																
Fish (vendor)	177	YES1 NO2→ NEXT ITEM DK8→ NEXT ITEM																

FOOD ITEM	ITEM CODE	Over the past 7 days, did you or others in your household eat any [FOOD ITEM]?	How much in total did your household eat in the past week?	How much of what you ate came from purchases?	How much did you spend on what was eaten last week? If your family ate part but not all of something you purchased, estimate what you spent only on the part that was consumed.	E1.06A QUANTITY	E1.06B UNIT	E1.06C ESTIMATE (MK)	How much of what you ate came from gifts or other sources?	E1.07C ESTIMATE (MK)	CHECK E1.07A	CHECK E1.06A
E1.01		E1.02	E1.03A QUANTITY	E1.03B UNIT	E1.04A QUANTITY	E1.04B UNIT	E1.05 (MK)	E1.06A QUANTITY	E1.06B UNIT	E1.07A QUANTITY	E1.07B UNIT	E1.06A
Doughnut (vendor)	178	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM										IF E1.06A IS > 0, ASK: "Please tell me how much it would have cost to buy that [FOOD ITEM] if you had to purchase it in the market today."
Samosa (vendor)	179	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM										IF E1.07A IS > 0, ASK: "Please tell me how much it would have cost to buy that [FOOD ITEM] if you had to purchase it in the market today."
Meal eaten at restaurant	180	YES 1 NO 2 → NEXT ITEM DK 8 → NEXT ITEM										
RESPONSE CATEGORIES FOR E1.03b/1.04b/1.06b/1.07b – UNITS KILOGRAMME 01 50 KG. BAG 02 90 KG. BAG 03 PAIL (Small) 04 PAIL (Medium) 05 PAIL (Large) 06 NO. 10 PLATE (Flat) 07 NO. 10 PLATE (Heaped) 08 NO. 12 PLATE (Flat) 09 NO. 12 PLATE (Heaped) 10 BUNCH (Small) 11 BUNCH (Medium) 12 BUNCH (Large) 13 PIECE (Small) 14 PIECE (Medium) 15 PIECE (Large) 16 HEAP (Small) 17 HEAP (Medium) 18 HEAP (Large) 19 BALE 20 BASKET (DENGU) (SHELLED) 21 BASKET (DENGU) (UNSHELLED) 22 OX-CART (UNSHELLED) 23 LITRE 24 CUP 25 TIN 26 GRAM 27 MILLILITRE 28 TEASPOON 29 BASIN 30 SACHET/TUBE 31 TOTAL 32 OTHER (SPECIFY) 96												
NOTE: ANY UNIT LISTED MUST BE ABLE TO BE CONVERTED TO A STANDARDIZED UNIT. THIS CONVERSION WILL HAPPEN DURING DATA ANALYSIS; IT SHOULD NOT BE DONE IN THE FIELD BY THE INTERVIEWER.												

QNO.	QUESTION	RESPONSE CATEGORIES
E1.08	Over the past 7 days, did any people who are not members of your household eat any meals in your household?	YES..... 1 NO 2 → SKIP TO E1.12 DON'T KNOW 8 → SKIP TO E1.12
E1.09	Over the past 7 days, how many people who are not members of your household ate meals in your household?	E1.09. NUMBER OF PEOPLE <input type="text"/> <input type="text"/> DON'T KNOW 98
E1.10	Over the past 7 days, what was the total number of days in which any meal was shared with people who are not members of your household?	E1.10. NUMBER OF DAYS <input type="text"/> <input type="text"/> DON'T KNOW 98
E1.11	Over the past 7 days, what was the total number of meals that were shared with people who are not members of your household?	E1.11. NUMBER OF MEALS <input type="text"/> <input type="text"/> DON'T KNOW 98
E1.12	Over the past 7 days, did your household purchase pet food for family pets like a cat or a dog?	YES..... 1 NO 2 → GO TO E1.14 DON'T KNOW 8 → GO TO E1.14
E1.13	How much did you spend on pet food last week?	ENTER AMOUNT IN MK: _____ DON'T KNOW 999998
E1.14	Over the past 7 days, were there any other expenditures on pets?	YES..... 1 NO 2 → GO TO MODULE E2 DON'T KNOW 8 → GO TO MODULE E2
E1.15	How much did you spend on other purchases for pets last week?	ENTER AMOUNT IN MK: _____ DON'T KNOW 999998

MODULE E2. Non-Food Expenditures Over Past 7 Days

"Now I would like to ask you about items that you or members of your household may have bought in the past week."

<u>ONE WEEK RECALL</u>				
ITEM	ITEM CODE	Over the past one week (7 days, did your household purchase or pay for any [ITEM]?	E2.02	How much did you pay (how much did they cost) in total? E2.03 MK
E2.01	191-200			
Charcoal	191	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM		
Firewood	192	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM		
Paraffin or kerosene	193	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM		
Cigarettes or other tobacco	194	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM		
Candles	195	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM		
Matches	196	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM		
Newspapers or magazines	197	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM		
Public transport – Bicycle Taxi (include any used for school under education costs; include any used for obtaining health care under health expenditures)	198	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM		
Public transport – Bus/Minibus (include any used for school under education costs; include any used for obtaining health care under health expenditures)	199	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM		
Public transport – Other (truck, oxcart, etc.) (include any used for school under education costs; include any used for obtaining health care under health expenditures)	200	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM		

MODULE E3. Non-Food Expenditures Over Past One Month

"Next I would like to ask you about items that you or members of your household may have bought over the past month."

ONE MONTH RECALL ITEM	ITEM CODE	Over the past one month, did your household purchase or pay for any [ITEM]?	How much did you pay (how much did they cost) in total?
E3.01	211-236	E3.02	E3.03 MK
Milling fees for grains (not including cost of grain itself), grain	211	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Bar soap (body soap or clothes soap)	212	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Clothes soap (powder, paste)	213	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Toothpaste, toothbrush	214	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Toilet paper	215	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Glycerine, Vaseline, skin creams	216	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Other personal products (shampoo, razor blades, cosmetics, hair products, etc.)	217	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Light bulbs	218	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Postage stamps or other postal fees	219	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Donation – to church, charity, beggar, etc.	220	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Petrol or diesel	221	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Motor vehicle service, repair, or parts	222	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Bicycle service, repair, or parts	223	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Wages paid to servants	224	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	

ONE MONTH RECALL ITEM	ITEM CODE	Over the past one month, did your household purchase or pay for any ITEM?	How much did you pay (how much did they cost) in total?
E3.01	211-236	E3.02	E3.03 MK
Repairs to household and personal items (radios, watches, etc., excluding battery purchases)	225	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Utilities: Natural gas	226	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Utilities: Electricity	227	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Utilities: Water	228	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Batteries	229	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Recharging of batteries, cell phones, etc.	230	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Air time for cell phones	231	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
MTL line	232	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
HEALTH EXPENDITURES (include estimated value of any in-kind payments, or borrowed amounts)			
Anything related to illnesses and injuries, including for medicine, tests, consultation, & in-patient fees	233	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Medical care not related to an illness – preventative health care, pre-natal visits, check-ups, etc.	234	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Non-prescription medicines, for example, Panadol, Fansidar, cough syrup, etc.	235	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Transportation used to access health-related services or care that did not require an overnight stay in a health facility or at a traditional healer's dwelling	236	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	

MODULE E4. Non-Food Expenditures Over Past Three Months

"Next I would like to ask you about items that you or members of your household may have bought over the past three months."

THREE MONTH RECALL ITEM	ITEM CODE	Over the past three months, did your household purchase or pay for any [ITEM]?	How much did you pay (how much did they cost) in total?
E4.01	241-279	E4.02	E4.03 MK
Infant clothing	241	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Baby nappies/diapers	242	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Boy's trousers (FOR ALL CLOTHING, EXCLUDE UNIFORMS/SCHOOL CLOTHING)	243	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Boy's shirts	244	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Boy's jackets	245	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Boy's undergarments	246	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Boy's other clothing (e.g., hats, gloves, belts, etc.)	247	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Men's trousers	248	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Men's shirts	249	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Men's jackets	250	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Men's undergarments	251	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	

<u>THREE MONTH RECALL</u>					How much did you pay (how much did they cost) in total?
ITEM	ITEM CODE	Over the past three months, did your household purchase or pay for any [ITEM]?	E4.02	E4.03 MK	
E4.01	241-279				
Men's other clothing (e.g., hats, gloves, belts, etc.)	252	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Girl's blouse/shirt	253	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Girl's dress/skirt	254	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Girl's undergarments	255	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Girl's other clothing (e.g., hats, gloves, belts, trousers, etc.)	256	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Women's blouse/shirt	257	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Chitenje cloth	258	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Women's dress/skirt	259	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Women's undergarments	260	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Women's other clothing (e.g., hats, gloves, belts, trousers, etc.)	261	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Boys shoes (include shoes, sandals, boots, slippers)	262	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Men's shoes (include shoes, sandals, boots, slippers)	263	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Girl's shoes (include shoes, sandals, boots, slippers)	264	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			

<u>THREE MONTH RECALL</u>					
ITEM	ITEM CODE	Over the past three months, did your household purchase or pay for any [ITEM]?	How much did you pay (how much did they cost) in total?		
E4.01	241-279	E4.02	E4.03		MK
Women's shoes (include shoes, sandals, boots, slippers)	265	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Cloth, thread, other sewing material	266	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Laundry, dry cleaning, tailoring fees	267	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Bowls, glassware, plates, silverware, etc.	268	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Cooking utensils (cookpots, stirring spoons and whisks, etc.)	269	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Cleaning utensils (brooms, brushes, etc.)	270	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Torch / flashlight	271	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Umbrella	272	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Paraffin lamp (hurricane or pressure)	273	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Stationery items (excluding school related)	274	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Books (excluding school related)	275	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Music or video cassette or CD/DVD	276	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			
Tickets for sports / entertainment events	277	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM			

THREE MONTH RECALL ITEM	ITEM CODE	Over the past three months, did your household purchase or pay for any [ITEM]?	How much did you pay (how much did they cost) in total?
E4.01	241-279	E4.02	E4.03 MK
House decorations	278	YES.....1 NO.....2 → NEXT ITEM DK.....8 → NEXT ITEM	
Night's lodging in rest house or hotel (excluding school or health related)	279	YES.....1 NO.....2 → NEXT ITEM DK.....8 → NEXT ITEM	

MODULE E5. Non-Food Expenditures Over Past 12 Months

"Now I would like to ask you about items that you or members of your household may have bought over the past one year."

ONE YEAR (12 MONTH) RECALL ITEM	ITEM CODE	Over the past one year (twelve months), did your household purchase or pay for any ITEM?	How much did you pay (how much did they cost) in total?
E5.01	291-322	E5.02	E5.03 MK
Carpet, rugs, drapes, curtains	291	YES.....1 NO2→ NEXT ITEM DK8→ NEXT ITEM	
Linen – towels, sheets, blankets	292	YES.....1 NO2→ NEXT ITEM DK8→ NEXT ITEM	
Mat – sleeping or for drying maize flour	293	YES.....1 NO2→ NEXT ITEM DK8→ NEXT ITEM	
Mosquito net	294	YES.....1 NO2→ NEXT ITEM DK8→ NEXT ITEM	
Mattress	295	YES.....1 NO2→ NEXT ITEM DK8→ NEXT ITEM	
Sports & hobby equipment, musical instruments, toys	296	YES.....1 NO2→ NEXT ITEM DK8→ NEXT ITEM	
Film, film processing, camera	297	YES.....1 NO2→ NEXT ITEM DK8→ NEXT ITEM	
Cement	298	YES.....1 NO2→ NEXT ITEM DK8→ NEXT ITEM	
Bricks	299	YES.....1 NO2→ NEXT ITEM DK8→ NEXT ITEM	
Iron sheets	300	YES.....1 NO2→ NEXT ITEM DK8→ NEXT ITEM	
Construction timber	301	YES.....1 NO2→ NEXT ITEM DK8→ NEXT ITEM	
Council rates	302	YES.....1 NO2→ NEXT ITEM DK8→ NEXT ITEM	

ONE YEAR (12 MONTH) RECALL		ITEM CODE	Over the past one year (twelve months), did your household purchase or pay for any ITEM?	How much did you pay (how much did they cost) in total?
ITEM		291-322	E5.02	E5.03 MK
Insurance – health (MASM, etc.), auto, home, life	303		YES.....1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM	
Fines or legal fees	304		YES.....1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM	
Lobola (bridewealth) costs	305		YES.....1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM	
Marriage ceremony costs	306		YES.....1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM	
Funeral costs, household members	307		YES.....1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM	
Funeral costs, non-household members (relatives, neighbors/friends)	308		YES.....1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM	
HEALTH EXPENDITURES over last 12 months (include estimated value of any in-kind payments or borrowed amounts)				
Hospitalizations or overnight stay in any hospital – total cost for treatment	309		YES.....1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM	
Travel to and from the medical facility for any overnight stay(s) or hospitalization	310		YES.....1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM	
Food costs during overnight stay(s) at the medical facility or hospitalization (if not already included above)	311		YES.....1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM	
Over-night(s) stay at a traditional healer's or faith healer's dwelling – total costs for treatment	312		YES.....1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM	
Travel costs to the traditional healer's or faith healer's dwelling for overnight stay(s)	313		YES.....1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM	
Food costs during overnight stay(s) at the traditional healer's or faith healer's dwelling	314		YES.....1 NO2→ NEXT ITEM DK.....8→ NEXT ITEM	

ONE YEAR (12 MONTH) RECALL		ITEM CODE	Over the past one year (twelve months), did your household purchase or pay for any [ITEM]?	How much did you pay (how much did they cost) in total?
ITEM		291-322	E5.02	E5.03 MK
EDUCATION EXPENDITURES over last 12 months (include estimated value of any in-kind payments or borrowed amounts)				
Tuition, including extra tuition fees	315		YES.....1 NO2→ NEXT ITEM DK8→ NEXT ITEM	
Expenditures on after school programs and tutoring	316		YES.....1 NO2→ NEXT ITEM DK8→ NEXT ITEM	
School books and stationery	317		YES.....1 NO2→ NEXT ITEM DK8→ NEXT ITEM	
School uniform	318		YES.....1 NO2→ NEXT ITEM DK8→ NEXT ITEM	
Boarding fees	319		YES.....1 NO2→ NEXT ITEM DK8→ NEXT ITEM	
Contribution to school building maintenance	320		YES.....1 NO2→ NEXT ITEM DK8→ NEXT ITEM	
Transport to and from school	321		YES.....1 NO2→ NEXT ITEM DK8→ NEXT ITEM	
Parent/Teacher Association and other related fees	322		YES.....1 NO2→ NEXT ITEM DK8→ NEXT ITEM	

NON-FOOD ITEMS THAT MAY OR MAY NOT HAVE BEEN PURCHASED						
ONE YEAR (12 MONTH) RECALL						
ITEM	Item Code	Over the past one year (12 months) did your household gather, purchase or pay for any [ITEM]?	(NOTE THAT THE VALUE OF THESE ITEMS SHOULD BE ENTERED ONLY IF THEY WERE PURCHASED OR USED FOR HOUSEHOLD USE, NOT FOR INVESTMENT PURPOSES)	What was the estimated total quantity of [ITEM] used?	Did your household gather the [ITEM], or did your household purchase or pay for the [ITEM]?	FOR ITEMS THAT WERE GATHERED: What was the total estimated value of [ITEM] that you used ? FOR ITEMS THAT WERE BOUGHT: How much did you spend in total on [ITEM]?
E5.04	323-325	E5.05	E5.06a Quantity	E5.06b Unit	E5.06c FILTER	E5.07 (MK) E5.08 (MK)
Woodpoles, bamboo	323	YES..... 1 NO 2 → NEXT ITEM			GATHERED 1 → E5.07 PURCHASED/PAID .. 2 → E5.08	→ SKIP TO NEXT ITEM
Grass for thatching roof or other use	324	YES..... 1 NO 2 → NEXT ITEM			GATHERED 1 → E5.07 PURCHASED/PAID .. 2 → E5.08	→ SKIP TO NEXT ITEM

RESPONSE CATEGORIES FOR E5.06b – UNITS
POLE 33
BALE 20

MODULE E6. Housing Expenditures

"Now I'd like to ask you some questions about your home."

RESPONSE CATEGORIES	
QNO.	QUESTION
E6.01	Do you own or are purchasing this house, is it provided to you by an employer, do you use it for free, or do you rent this house?
E6.02	If you <u>sold</u> this dwelling today, how much would you receive for it?
E6.03	How old is this house, in years?
E6.04	If you <u>rented</u> this dwelling <u>out</u> today, how much rent would you receive?

OWN1
 BEING PURCHASED2
 EMPLOYER PROVIDES3 → E6.04
 FREE4 → E6.05
 RENTED5
 DON'T KNOW/NON-RESPONSE/NA.....91

[] [] [] [] [] [] [] [] [] []

DON'T KNOW/NON-RESPONSE/NA.....9999991

[] [] [] [] [] [] [] [] [] []
 DON'T KNOW/
 NON-RESPONSE/NA.....991 → SKIP TO E6.06

E6.04A MK	E6.04B UNIT
[] [] [] [] [] [] [] [] [] [] DON'T KNOW/NON-RESPONSE /NA.....9999991 → SKIP TO E6.09	DAY1 WEEK2 MONTH3 YEAR4 DON'T KNOW/ NON-RESPONSE /NA.....99991 → SKIP TO E6.09

RESPONSE CATEGORIES	
QNO.	QUESTION
E6.05	How much do you pay to rent this dwelling?
E6.06	Do you pay a mortgage on this house, that is, a regular payment towards purchasing the house?
E6.07	How often do you make mortgage payments?
E6.08	How much do you pay each time you make a payment on your mortgage?
E6.09	In the past one month, how much did you spend on repairs & maintenance to this house?

E6.05A M/K	E6.05B UNIT
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	DAY1 WEEK.....2 MONTH3 YEAR.....4 DON'T KNOW/ NON-RESPONSE /NA.....99991 → SKIP TO E6.09

YES1
 NO2 → SKIP TO E6.09

ONCE A MONTH1
 ONCE EVERY 3 MONTHS2
 ONCE EVERY 6 MONTHS3
 ONCE A YEAR.....4
 OTHER (SPECIFY).....6

AMOUNT IS VARIABLE999996
 DON'T KNOW/
 NON-RESPONSE999991

DON'T KNOW/
 NON-RESPONSE999991

MODULE E7. Durable Goods Expenditures

"Now I'd like to ask you some questions about items that may be owned by your household."

ITEM	Item Code	Does your household own a [ITEM]?	How many [ITEM]s do you own?	What is the age of these [ITEM]s? IF MORE THAN ONE ITEM, AVERAGE AGE.	If you wanted to sell one of these [ITEM]s today, how much would you receive? IF MORE THAN ONE, AVERAGE VALUE.	Did you purchase or pay for any of these [ITEM]s in the last 12 months?	How much did you pay for all these [ITEM]s all together (total) in the last 12 months?
E7.01	341-371	E7.02	E7.03 NUMBER	E7.04 YEAR	E7.05 MK	E7.06	E7.07 MK
Bed/table/chair	341	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Fan	342	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Air conditioner	343	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Radio	344	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Tape or CD/DVD player/VCR	345	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Television	346	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Sewing machine	347	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Kerosene/paraffin stove	348	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Electric stove; hot plate	349	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Gas stove	350	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Refrigerator	351	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	

ITEM	Item Code	Does your household own a [ITEM]?	How many [ITEM]s do you own?	What is the age of these [ITEM]s? IF MORE THAN ONE ITEM, AVERAGE AGE.	If you wanted to sell one of these [ITEM]s today, how much would you receive? IF MORE THAN ONE, AVERAGE VALUE.	Did you purchase or pay for any of these [ITEM]s in the last 12 months?	How much did you pay for all these [ITEM]s all together (total) in the last 12 months?
E7.01	E7.02	E7.03	E7.04	E7.05	E7.06	E7.07	MK
Washing machine	341-371	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Bicycle	352	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Boat	353	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Motorcycle/scooter	354	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Car	355	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Mini-bus	356	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Lorry	357	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Beer-brewing drum	358	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Upholstered chair, sofa set	359	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Coffee table (for sitting room)	360	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Cupboard, drawers, bureau	361	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Lantern (paraffin)	362	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
	363	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	

ITEM	Item Code	Does your household own a [ITEM]?	How many [ITEM]s do you own?	What is the age of these [ITEM]s? IF MORE THAN ONE ITEM, AVERAGE AGE.	If you wanted to sell one of these [ITEM]s today, how much would you receive? IF MORE THAN ONE, AVERAGE VALUE.	Did you purchase or pay for any of these [ITEM]s in the last 12 months?	How much did you pay for all these [ITEM]s all together (total) in the last 12 months?
E7.01	341-371	E7.02	E7.03 NUMBER	E7.04 YEAR	E7.05 MK	E7.06	E7.07 MK
Desk	364	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Clock	365	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Iron (for pressing clothes)	366	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Computer equipment & accessories	367	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Satellite dish	368	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Solar panel	369	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Generator	370	YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM				YES.....1 NO.....2→ NEXT ITEM DK.....8→ NEXT ITEM	
Phone/cell phone	371	YES.....1 NO.....2→ MODULE F DK.....8→ MODULE F				YES.....1 NO.....2→ MODULE F DK.....8→ MODULE F	