

Household Number:

Bangladesh Policy Research and Strategy Support Program (PRSSP)
Bangladesh Integrated Household Survey Questionnaire (BIHS) 2011-2012

Starting date:
26 October 2011

Survey designed and supervised by: International Food Policy Research Institute (IFPRI)
Survey administered by: Data Analysis and Technical Assistance Limited (DATA)

Household Questionnaire

Module A: Sample Household and Identification

Question No.	Household Identification	Response	Question No.	Household Identification	Response
A01	Household Identification Number:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	A11	Name of the Household Head and Member ID:	<input type="text"/> <input type="text"/>
A02	Census number:	<input type="text"/> <input type="text"/> <input type="text"/>	A12	Name and Member ID of Household Head's father (if Household Head is female report for Household Head's husband):	<input type="text"/> <input type="text"/>
X	Household location/landmark:		A13	Household Head's religion:	<input type="text"/> Muslim 1 Hindu..... 2 Christian .. 3 Buddhist...4 Other (specify) ...5
A03	Village (name and code):	<input type="text"/> <input type="text"/>	A14	Primary language spoken:	<input type="text"/> Bangla 1 Urdu 2 Hindi..... 3 Tribal4 Others (specify) ...5
A04	Union (name and code):	<input type="text"/> <input type="text"/>	A15	Household's Ethnic group:	<input type="text"/> Bangali1 Bihari.....2 Tribal (specify)3 Others (specify)4
A05	Thana/ Upazilla(name and code):	<input type="text"/> <input type="text"/>	A16	Date of the First visit (dd/mm/yy):	Day Month Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
A06	District (name and code):	<input type="text"/> <input type="text"/>	A17	Date of the second visit (dd/mm/yy):	Day Month Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
A07	Division(name and code):	<input type="text"/> <input type="text"/>	A18	Name of Interviewer and code:	<input type="text"/> <input type="text"/>
A08	GPS Coordinates: [Report degree, minute and second]	North: ____° ____° ____ East: ____° ____° ____	A19	Name of Supervisor and code:	<input type="text"/> <input type="text"/>
A09	Mobile phone number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	A20	Date of Data Verification (dd/mm/yy)	Day Month Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
A10	Name and Member ID(from Module B1) of the Primary Respondent (Household Head / primary male):	<input type="text"/> <input type="text"/>	A21	Signature of supervisor:	

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CONSENT OF RESPONDENT

Good morning/afternoon. I am _____ from the Data Analysis and Technical Assistance Limited (DATA), a Bangladeshi research organization based in Dhaka. Together with the International Food Policy Research Institute (IFPRI), we are conducting a survey that will provide IFPRI with necessary information to carry out research that is designed to help promote the welfare of Bangladeshis; particularly, to improve food consumption and nutrition of the people and women's status, and to enhance agricultural development and income generation. Your household has been chosen by a random selection process.

We are inviting you to be a participant in this study. We value your opinion and there are no wrong answers to the questions we will be asking in the interview. We will use approximately 4 hours of your time to collect all the information. If you prefer, we can do the interview in two visits. There will be no cost to you other than your time. There will be no risk as a result of your participating in the study. Your participation in this research is completely voluntary. You are free to withdraw your consent and discontinue participation in this study at any time.

This study is conducted anonymously. You will only be identified through code numbers. Your identity will not be stored with other information we collect about you. Your responses will be assigned a code number, and the list connecting your name with this number will be kept in a locked room and will be destroyed once all the data has been collected and analyzed. Any information we obtain from you during the research will be kept strictly confidential.

Your participation will be highly appreciated. The answers you give will help provide better information to policy-makers, practitioners and program managers so that they can plan for better services that will respond to your needs.

The researcher read to me orally the consent form and explained to me its meaning. I agree to take part in this research. I understand that I am free to discontinue participation at any time if I so choose, and that the investigator will gladly answer any question that arise during the course of the research.

Contact Person:

Name of the Principal Investigator (PI): Dr. Akhter Ahmed

PRSSP/IFPRI

Address: House 10A, Road 35, Gulshan 2, Dhaka 1212

Tel: 989-8686; E-mail of PI: a.ahmed@cgiar.org

Please tick mark on the right box
depending on the respondent's consent
Consent given:

Yes

No

Signature of the Enumerator: _____ **Date:** /____/____/____/

Household Number:

DEFINITION OF HOUSEHOLD

A household is a group of people who live together and take food from the “same pot.” In our survey, a household member is someone who has lived in the household at least 6 months, and at least half of the week in each week in those months.

Even those persons who are not blood relations (such as servants, lodgers, or agricultural laborers) are members of the household if they have stayed in the household at least 3 months of the past 6 months and take food from the “same pot.” If someone stays in the same household but does not bear any costs for food or does not take food from the same pot, they are not considered household members. For example, if two brothers stay in the same house with their families but they do not share food costs and they cook separately, then they are considered two separate households.

Generally, if one person stays more than 3 months out of the last 6 months outside the household, they are not considered household members. We do not include them even if other household members consider them as household members.

Exceptions to these rules should be made for:

Consider as household member

- A newborn child less than 3 months old.
- Someone who has joined the household through marriage less than 3 months ago.
- Servants, lodgers, and agricultural laborers currently in the household and will be staying in the household for a longer period but arrived less than 3 months ago.

Do not consider as household member

- A person who died very recently though stayed more than 3 months in last 6 months.
- Someone who has left the household through marriage less than 3 months ago.
- Servants, lodgers, and agricultural laborers who stayed more than 3 months in last 6 months but left permanently.

This definition of the household is very important. The criteria could be different from other studies you may be familiar with, but you should keep in mind that you should not include those people who do not meet these criteria. Please discuss any questions with your supervisor.

Household Number:

Module B: Household Composition and Education (Male Enumerator)

Module B1: Household Composition

Member ID	Name	Sex Male1 Female...2	Age** (complete years)	Relation of primary respondent to Household Head	Marital Status	Whether (name) was abroad more than 6 months during last 5 years Yes 1 No..... 2	Why did (name) return to the household from abroad?	Literacy	Education (Highest class passed)	Currently (2011) attending school/ college? Yes 1 No 2	Current main Occupation Go to next row if responses are code : 81-86	Do you work in rural /urban area? Rural....1 Urban...2	Location of employment
		Code ↑		Code 1	Code 2		Code 3	Code 4	Code 5	Code ↑	Code 6	Code ↑	Code 7
MID	Name	B1_01	B1_02	B1_03	B1_04	B1_05	B1_06	B1_07	B1_08	B1_09	B1_10	B1_11	B1_12

Note: **Write complete years. For example if age is 18 years and 9 months, write only 18 years.

Interviewer: Please find the code list for this Module B1 in the next page.

Household Number: **Code list for Module B1:**

Code 1: Relationship	Code 4 : Literacy	Code 6: Main Occupation	
Relationship with primary respondent Primary respondent 1 Primary respondent Husband/wife 2 Son/daughter 3 Daughter/son -in-law 4 Grandson/daughter 5 Father/mother 6 Brother/sister 7 Niece/Nephew 8 Primary respondent's cousin 9 Relationship with primary respondent's husband/wife Father-in-law/mother-in-law 10 Brother/Sister-in-law 11 Husband/wife's niece/nephew 12 Primary respondent's husband/wife's cousin 13 Other relative/non relative Other relative 14 Permanent servant 15 Other Non relative/friends 16	Cannot read and write 1 Can sign only 2 Can read only 3 Can read and write 4 Code 5: Education (Highest class passed) Never attended school 99 Reads in class I 0 Completed class I 1 Completed class II 2 Completed class III 3 Completed class IV 4 Completed class V 5 Completed class VI 6 Completed class VII 7 Completed class VIII 8 Completed class IX 9 Completed Secondary School/Dakhil 10 Completed Higher Secondary/Alim 12 BA/BSC pass/Fazil 14 BA/BSC honors/Fazil 15 MA/MSc and above/Kamil 16 SSC Candidate 22 HSC Candidate 33 Preschool class (general) 66 Preschool (mosque based) 67 Medical/MBBS 71 Nursing 72 Engineer 73 Diploma Engineer 74 Vocational/Technical Education 75 Other (specify) 76	Wage Labor Agricultural day labor 1 Earth work (govt program) 2 Earth work (other) 3 Sweeper 4 Scavenger 5 Tea garden worker 6 Construction labor 7 Factory worker 8 Transport worker (bus/truck helper) 9 Apprentice 10 Other wage labor (specify) 11 Salaried worker Government/ parastatal 12 Service (private sector) 13 NGO worker 14 House maid 15 Teacher (GoB-Primary school) 16 Teacher(Non GoB Primary school) 17 Teacher (GoB High school) 18 Teacher (Non-GoB High school) 19 Teacher (college,university) 20 Other salaried worker(specify) 21 Self-employment Rickshaw/van pulling 22 Driver of motor vehicle 23 Tailor/seamstress 24 Blacksmith 25 Potter 26 Cobbler 37 Hair cutter 28 Clothes washer 29 Porter 30 Goldsmith/silversmith 31 Repairman (appliances) 32 Mechanic (vehicles) 33 Plumber 34 Electrician 35	Self-employment (continued) Carpenter 36 Mason 37 Doctor 38 Rural phisician 39 Midwife 40 Herbal doctor/Kabiraj 41 Engineer 42 Lawyer/deed writer/Moktar 43 Religious leader (Imam/Muazzem/ Khadem/Purohit) 44 Lodging master 45 Private tutor/house tutor 46 Beggar 47 Trader Small trader (roadside stand or stall) ... 50 Medium trader (shop or small store) 51 Large trader (large shop or whole sale) 52 Fish Trader 53 Contractor 54 Production Food Processing 55 Small industry 56 Handicrafts 57 Livestock Poultry related work/occupation Milk collector 58 Livestock Vet medicine seller 59 Livestock Feed supplier 60 Commercially feed producer 61 Animal Breeder 62 Veterinary/paravet doctor 63 Farming Working own farm (crop) 64 Share cropper/tenant 65 Homestead farming 66 Fisherman (using non owned/not leased water body) 67 Raising fish / fish pond 68 Raising poultry 69 Raising livestock 70 Dairy production/ dairy farming 71 Other self employed (specify) 72 Non-earning occupation Student 81 Housewife 82 Retired 83 Child(age <12 no study/ work) 84 Physically/ mentally challenged 85 Jobless 86 Don't know 999 Code 7: Location of employment This village/ward 1 Other village/ward in this union.. 2 Other union in this thana 3 Other thana in this district 4 Other district 5
Code 2: Marital status code Unmarried (never married) 1 Married 2 Widow/widower 3 Divorced 4 Separated/Deserted 5			
Code3: Reason for returning from abroad Homesick 1 Due to illness 2 End of employment contract 3 Job loss 4 Disagreement with authorities 5 Due to Economic Recession 6 Other (specify) 7			

Household Number: **Module B2: Education**

Report for all children of age 6-18 years or those attending or have attended primary/secondary school or madrasa.

MID	Name	Ever attend school/ madrasa? Yes...1>>B2_03 No....2	Why did you never attend school/ madrasa? Next child	When did you first attend school /madrasa ?	Class you were admitted to when first attending school	Type of last school/ madrasa attended	How far is the school/ madrasa from your house?	Were you enrolled in school in 2010? Yes...1 No2	Did you go to school in 2011? Yes...1 No...2>>B2_12	Currently in what type of program are you participating?	Class attending/ed in 2011	Are you repeating the class (in 2010 and 2011) Yes..1>>next child No ...2>>next child N/A9>>next child	Programs participation before 2011 Note: report last two programs in case of multiple programs participation	Which year did the child stop attending school? *not applicable ...9999	Why did the child stop attending school? Next child	
		Code ↑	Code 1	Year	Code 2	Code 3	km	Code ↑	Code ↑	Code 4	Code 2	Code ↑	Code 4	Year	Code 1	
MID	Name	B2_01	B2_02	B2_03	B2_04	B2_05	B2_06	B2_07	B2_08	B2_09	B2_10	B2_11	B2_12a	B2_12b	B2_13	B2_14

Note: * Report “9999” (not applicable) in Column B2_13, if attended school in 2011 (i.e. response in B2_10 is “2”), then Go to next row for next child.

Interviewer: Please find the code list for this module B2 in the next page.

Household Number: **Code list for Module B2:**

Code 1: Reason not attending/stop attending school (applicable for B2_02 and B2_14)	Code2: Class attended (applicable for B2_04 and B2_10)	Code 3: Type of school attended/attending	Code 4: Type of program (applicable for B2_09, B2_12a and B2_12b)
Age/sickness/unwillingness perspective: Below school/madrasa age 1 Sick/disabled child 2 Child didn't want to attend school 3 Teachers do not teach well 4 Parents don't want to send children to school 5 Examination not passed 6 Distance perspective: No school/madrasa nearby 7 Transport/communication problem 8 Non-ability perspective: Inability to bear schooling expenses /inability to buy school uniform 9 Engaged in household work 10 Engaged in family business/agriculture 11 Works elsewhere for income 12 Stipend perspective: Insufficient amount of stipend money /educational allowance 13 Not getting stipend, so withdrawn from school/madrasa 14 Gender perspective: Don't like to send girls to school 15 There are no female teacher in school 16 No only boys' or only girls' school 17 Boys tease girls/don't like girls 18 Environment of school is not safe 19 No separate latrine for female students 20 Due to marriage 21 Other(specify) 22	Class I 1 Class II 2 Class III 3 Class IV 4 Class V 5 Class VI 6 Class VII 7 Class VIII 8 Class IX 9 Class X/Dakhil 10 HSC/Alim 1st year 11 HSC/Alim 2nd year 12 BA/BSC /Fazil 1st year 13 BA/BSC /Fazil 2nd year 14 BA/BSC /Fazil 3rd year 15 BA/BSC /Fazil 4th year 16 MA/MSc and above/Kamil 17 SSC completed but not enrolled .. 22 HSC completed but not enrolled .. 33 Preschool class (general) 66 Preschool (mosque based) 67	Govt. aided 1 Private 2 Ananda school 6 NGO run 4 Aliyah madrasa 5 Quomi madrasa 6 College/varsity 7 Nurania/hafezia Madrasa 8 Other 9	Not participated/ ing in any program 1 Food for education (FFE) 2 Participated in Tk 20 stipend program 3 Ananda school stipend program 4 Tk. 100(Tk. 125) stipend program 5 School feeding program 6 Secondary school student stipend program ... 7 Higher secondary stipend program 8

Household Number:

Module C: Employment (Male Enumerator)

=> Ask about all members aged 6 years and above.

Note: Collect information on all type of economic work performed by each HH member in the last 7 days. If any member is involved in more than one economic activity, use one row for each type of economic work.

Recall period: Last 7 days, if not mentioned otherwise.

MID	Name	What was _____ employment status in the past 7 days? if 1 or 2 >> C05 if 3 >> C02 if 4 >> C04 if 5-12 -> next row	Why did _____ not work in the last 7 days?	When will _____ return to work? This week.....1 Next week2 After 2 weeks.....3 Don't know ..9 For any of the above response Go to C05	How long have you been unemployed / did not work? < 1 month.....1 1-<3 months 2 3-<6 months3 6-<9 months4 9-<12 months5 more than 1 year.....6 Looking for job for the first time.....7 Go to next member	Information on economic activities									Monthly salary OR Average monthly income form this activity?
						Occupation /economic activity in last 7 days	Activity serial	For_____ (activity) on average for how many days last week did you work?	For_____ (activity) on average for how many hours a day did you work?	What is the nature of the _____ work/ activity performed? Daily/weekly wage.....1 Salary2>>C14 Self employed3>>C14 Work without pay4>> next row	What was _____ daily wage / salary?				
		[Code 1] ↓	[Code-2] ↓	[Code] ↑	[Code] ↑	[Code 3] ↓	No.	[days]	[hours]	[Code] ↑	[Tk]	[Tk]			[Tk]
MID	Name	C01	C02	C03	C04	C05	C06	C07	C08	C09	C10	C11	C12	C13	C14

Note: Interviewer: Please find the code list for this section in the next page.

Household Number: **Code list for Module C: Employment**

Code 1: Employment status	Code 2: Reasons for not working in the last 7 days	Code 3: Occupation/economic activity
Worked for pay (salary, wage,self-employed) 1 Worked without pay (apprentice,family business) 2 Did not work but have a job 3 Did not work but looked for a job 4 Did not work because: Only studied (student) 5 Too young (not student) 6 Too old/retired 7 Home/household work (includes live-in servant) 8 Disabled/invalid 9 Don't need to 10 Other (specify) 11	Sick 1 Vacation 2 Hartal/strike 3 Taking care of household matters 4 Taking care of family members 5 Other (specify) 6	Wage Labor Agricultural day labor 1 Earth work (govt program) 2 Earth work (other) 3 Sweeper 4 Scavenger 5 Tea garden worker 6 Construction labor 7 Factory worker 8 Transport worker (bus/truck helper) 9 Apprentice 10 Other wage labor (specify) 11 Salaried worker Government/ parastatal 12 Service (private sector) 13 NGO worker 14 House maid 15 Teacher (GoB-Primary school) 16 Teacher(Non GoB Primary school) 17 Teacher (GoB High school) 18 Teacher (Non-GoB High school) 19 Teacher (college,university) 20 Other salaried worker(specify) 21 Self-employment Rickshaw/van pulling 22 Driver of motor vehicle 23 Tailor/seamstress 24 Blacksmith 25 Potter 26 Cobbler 37 Hair cutter 28 Clothes washer 29 Porter 30 Goldsmith/silversmith 31 Repairman (appliances) 32 Mechanic (vehicles) 33 Plumber 34 Electrician 35 Carpenter 36 Mason 37 Doctor 38 Rural phisician 39 Midwife 40
		Self-employment (continued) Herbal doctor/Kabiraj 41 Engineer 42 Lawyer/deed writer/Moktar 43 Religious leader (Imam/Muazzem/ Khadem/Purohit) 44 Lodging master 45 Private tutor/house tutor 46 Beggar 47 Trader Small trader (roadside stand or stall) 50 Medium trader (shop or small store) 51 Large trader (large shop or whole sale) 52 Fish Trader 53 Contractor 54 Production Food Processing 55 Small industry 56 Handicrafts 57 Livestock Poultry related work/occupation Milk collector 58 Livestock Vet medicine seller 59 Livestock Feed supplier 60 Commercially feed producer 61 Animal Breeder 62 Veterinary/paravet doctor 63 Farming Working own farm (crop) 64 Share cropper/tenant 65 Homestead farming 66 Fisherman (using non owned/not leased water body) 67 Raising fish / fish pond 68 Raising poultry 69 Raising livestock 70 Dairy production/ dairy farming 71 Other self employed (specify) 72

Household Number: **Module D: Assets (Male Enumerator)****Module D1: Current Household Assets**

Description of asset	Asset code	Does your household own the item? Yes...1 No....2>>next row	Quantity	What portion of asset owned by household?	ID of owner Report three primary owners If household member, write MID If not household member, then use following codes: All members jointly.....71 Male outside household.....72 Female outside household. ...73			How was the asset acquired? (report most expensive item if quantity >1) Purchase1 Gift2 Dowry.....3 Inheritance4 Own produced ..5	Year of purchase/ Acquisition (report for most expensive item if quantity >1)	Purchase value/ price (report total value for all items owned)	Current value/ if asset sold today how much will you receive? (report total value for all items owned)	Type of asset* Consumption only 1 Consumption and Productive 2 Productive only 3
			(No.)		MID			Code↑	Year	(Tk)	(Tk)	Code ↑
D1_01	D1_02	D1_03	D1_04	D1_05	D1_06a	D1_06b	D1_06c	D1_07	D1_08	D1_09	D1_10	D1_11
Trunk /Suitcase	1											
Buckets / Pots	2											
Stove / Gas burner	3											
Metal cooking pots	4											
Bed / Khat / Chowki	5											
Armoire/Cabinet/ Alna	6											
Table / chair	7											
Hukka	8											
Electric fan	9											
Electric iron	10											
Radio	11											
Audio cassette/CD player	12											
Wall clock /watch	13											
Television (B/W)	14											

Household Number:

Description of asset	Asset code	Does your household own the item? Yes...1 No....2>>next row	Quantity	What portion of asset owned by household?	ID of owner Report three primary owners If household member, write MID If not household member, then use following codes: All members jointly.....71 Male outside household.....72 Female outside household. ...73			How was the asset acquired? (report most expensive item if quantity >1) Purchase 1 Gift 2 Dowry 3 Inheritance 4 Own produced ..5	Year of purchase/ Acquisition (report for most expensive item if quantity >1)	Purchase value/ price (report total value for all items owned)	Current value/ if asset sold today how much will you receive? (report total value for all items owned)	Type of asset* Consumption only 1 Consumption and Productive 2 Productive only 3
			(No.)		MID			Code↑	Year	(Tk)	(Tk)	Code ↑
D1_01	D1_02	D1_03	D1_04	D1_05	D1_06a	D1_06b	D1_06c	D1_07	D1_08	D1_09	D1_10	D1_11
Television (Color)	15											
Jewelry (gold/silver)	16											
Sewing machine	17											
Bicycle	18											
Rickshaw	19											
Van (tricycle van)	20											
Boat	21											
Engine boat	22											
Motorcycle	23											
Mobile phone set	24											
Land phone set	25											
Dheki	26											
Jata	27											
Randa	28											
Saw	29											
Hammer	30											
Patkoa	31											
Fishing net	32											

Household Number:

Description of asset	Asset code	Does your household own the item? Yes...1 No....2>>next row	Quantity	What portion of asset owned by household?	ID of owner Report three primary owners If household member, write MID If not household member, then use following codes: All members jointly.....71 Male outside household.....72 Female outside household. ...73	How was the asset acquired? (report most expensive item if quantity >1) Purchase 1 Gift 2 Dowry 3 Inheritance 4 Own produced ..5		Year of purchase/ Acquisition (report for most expensive item if quantity >1)	Purchase value/ price (report total value for all items owned)	Current value/ if asset sold today how much will you receive? (report total value for all items owned)	Type of asset* Consumption only 1 Consumption and Productive 2 Productive only 3	
			(No.)		MID			Code↑	Year	(Tk)	(Tk)	Code ↑
D1_01	D1_02	D1_03	D1_04	D1_05	D1_06a	D1_06b	D1_06c	D1_07	D1_08	D1_09	D1_10	D1_11
Spade (Kodal)	33											
Axe (Kural)	34											
Shovel (belcha)	35											
Shabol	36											
Daa	37											
Horse	38											
Mule	39											
Donkey	40											
Other Animal (specify)	41											
Cash in hand	42											
Solar energy panel	43											
Electricity Generator	44											
IPS	45											
Other[_____]	46											
Other2[_____]	47											

Note:* Consumption assets are used by household members that do not generate income. Productive assets are used for generating income.

For example, a milk cow is a consumption asset if its milk is used for only consumption for the household and not sold; but if the milk is sold then the milk cow is considered as a productive asset because it generates income for the household. If the milk is consumed by the household and also sold for income then the milk cow is considered as both consumption and productive asset.

Household Number: **Module D2: Agricultural Implements and Other Productive assets**

Description of asset	Asset code	Do your household own the item? Yes...1 No....2>>next row	Quantity	What portion of asset owned by household?	ID of owner Report three primary owners If household member, write MID If not household member, then use following codes: All members jointly 71 Male outside household..... 72 Female outside household.... 73	How was the asset acquired? (report most recent item if quantity >1) Purchase 1 Gift 2 Dowry 3 Inheritance 4 Own produced .. 5	Year of purchase/ acquisition (report for the most expensive item if quantity >1)	Purchase value/price (report total value for all items owned)	Current value/ if asset sold today how much will you receive? (report total value for all items owned)		
	[Code]		(No.)		MID	Code ↑	Year	(Tk)	(Tk)		
D2_01	D2_02	D2_03	D2_04	D2_05	D2_06a	D2_06b	D2_06c	D2_07	D2_08	D2_09	D2_10
Farming tools:											
Reaper/Sickle	1										
Weeding tool	2										
Harrower	3										
Rake	4										
Plough and yoke for animals	5										
	6										
Pesticide sprayer	7										
Wheelbarrow	8										
Bullock cart	9										
Push cart	10										
Other Light Machinery (Specify)	11										
Machinery:											
Tractor	12										
Power Tiller	13										
Trolley/Trailers	14										
Thresher	15										
Fodder cutting machine	16										
Swing basket	17										

Household Number:

Description of asset	Asset code	Do your household own the item? Yes...1 No....2>>next row	Quantity	What portion of asset owned by household?	ID of owner Report three primary owners If household member, write MID If not household member, then use following codes: All members jointly 71 Male outside household..... 72 Female outside household.... 73			How was the asset acquired? (report most recent item if quantity >1) Purchase1 Gift2 Dowry.....3 Inheritance4 Own produced ..5	Year of purchase/acquisition (report for the most expensive item if quantity >1)	Purchase value/price (report total value for all items owned)	Current value/ if asset sold today how much will you receive? (report total value for all items owned)
	[Code]		(No.)		MID			Code ↑	Year	(Tk)	(Tk)
D2_01	D2_02	D2_03	D2_04	D2_05	D2_06a	D2_06b	D2_06c	D2_07	D2_08	D2_09	D2_10
Don	18										
Hand tube well	19										
Treadle pump	20										
Rower pump	21										
Low lift pump (LLP) for irrigation	22										
Shallow tube well	23										
Deep tube well	24										
Electric motor pump	25										
Diesel motor pump	26										
Spraying machines (chem./fertilizer)	27										
Harvester	28										
Other Heavy Machinery (Specify)	29										
Other productive assets:											
Masons equipment	30										
Potters Chaka	31										
Blacksmiths Hapor	32										
Charka	33										

Household Number: **Module E: Savings (Male Enumerator)****Ask only for all members who are 15 years or older.****E01.** Have any adult in the household had any savings in the past 1 year?☐ Yes 1
☐ No..... 2**E02.** Does any adult in the household currently have any savings?☐ Yes 1
☐ No..... 2 If no, **END MODULE.****Ask how many accounts each individual currently has and list them all. Each “account” should have a separate row. If the individual has more than one “account”, put in separate rows.**

Serial No.	Saver	Where do you save?	How do you use / plan to use the savings? Report primary use of savings	Total amount currently saved in this place	How frequently do you save?
		[Code 1]	[Code 2]	(Tk)	Code 3
E03	MID	E04	E05	E06	E07

Code 1: Where	Code 2: Use / Intended Use	Code 3: How frequently do you save
At home 1	To buy household goods 1	Daily 1
NGO (name of NGO)..... 2	To buy agricultural implements 2	Weekly 2
Shamity (other than NGO) 3	To buy productive assets(other than agriculture)..... 3	Monthly 3
Bank..... 4	To start / help business 4	Quarterly..... 4
Shop..... 5	To buy land / house..... 5	Biannually(every 6 months)..... 5
Post office / government institution 6	For education / training 6	Yearly 6
Employer's provident fund 7	For marriage / dowry..... 7	Not regularly..... 7
Insurance company 8	To build / repair house 8	
Relative / friend / neighbor 9	To get loan 9	
Savings collector..... 10	To lend to others 10	
Other (specify) 11	To prepare for difficult times/danger..... 11	
	To send someone abroad for a job..... 12	
	For the future of children 13	
	Medical or other emergency 14	
	Don't know/no special reason 15	
	Other (specify) 16	

Household Number: **Module F: Loans (Male Enumerator)****Ask only for all members who are 15 years or older.****Report cash loans. Include both interest bearing and non bearing cash loans.****F01.** Have any adult in the household ever had any loans?☐ Yes 1
☐ No..... 2**F02.** Does any adult in the household currently have a loan with any individual or institution?☐ Yes 1
☐ No 2 If no, **END MODULE.****First ask how many loans each individual currently has and list them all. Each loan should have a separate row. If an individual has more than one loan, put in separate rows.**

Serial No.	Who took the loan?	What was the source of the loan?	If the source is an NGO, write the code of that NGO	What was the loan mainly used for? Report primary 3 uses			Amount of loan	What was the interest rate? (Report 999 if respondent does not know the interest rate)	What is the outstanding amount of the loan?	Is the outstanding amount with or without interest? With interest..... 1 Without interest..... 2
		[Code 1]	[Code 2]				(Tk)	(percent)	(Tk)	Code ↑
F03	MID	F04	F05	F06_a	F06_b	F06_c	F07	F08	F09	F10

Code 1: Source of loan	Code 2 :NGO	Code 3: Loan use	
Relative/friend/neighbor	BRAC..... 1	Business enterprise	Purchase Land14
Bangladesh Krishi Bank (BKB).....	ASA..... 2	To buy fertilizer	To purchase cow/goat.....15
Rajshahi Krishi Bank (RAKUB).....	Proshika..... 3	To buy seeds	For medical treatment.....16
Other Bank.....	Caritas..... 4	To buy pesticides	To meet household consumption needs17
Other financial institution	Shonirbhar Bangladesh..... 5	To buy irrigation equipment	Rent / purchase / improve housing18
NGO (name of NGO.....)	Thengamara Mohila Shobuj Shongha	To buy other agricultural implements	Educational expenses19
Employer	(TMSS)..... 6	To buy water for irrigation..... 7	Marriage expenditure20
Shop / Dealer / Trader	RDRS Bangladesh..... 7	Costs of diesel/electricity for agriculture	Dowry21
Money lender	Bureau Tangail..... 8	Labor wages for agriculture	Funeral22
Shamity (other than NGO)	Jagoroni Chakra..... 9	Costs of hired machines/animals	To lend out at higher interest.....23
Other (specify)	Voluntary Organisation For Social Development	for agriculture	To go abroad24
	(VOSD)..... 10	To buy productive assets	To repay other loan25
	People Oriented Program Implementation.....	for purposes other than agriculture	Other (specify)26
	(POPI)..... 11	For lease of land for agriculture (cash only) ... 12	
	Gono Kalyan Trust (GKT)..... 12	For lease of land used for purpose	
	Bachte Shekha 13	other than agriculture(cash only)	
	PKSF..... 14		
	BRDB..... 15		
	Other NGO (specify) 16		

Household Number: **Module G: Roster of land and pond/water bodies owned or under operation (Male Enumerator)****Note: List all land (all type of land & water bodies) owned or under operation in last 12 months [1st December (15th Agrahayon) 2010 to 30th November (14th Agrahayon) 2011].**

Plot ID	Plot Description	Plot Type	Size/ area	Distance from home	Usual flood depth (during monsoon/ flood season)	Soil type	Current operational status	If the plot is rented/ leased in/out for cash, report amount received per month.	Who owns the plot? (member ID) Report 3 primary owners. If HH member, write MID. If outside household, use code 4.			Who own the plot officially? Report 3 primary owners MID			Current market value of the land (amount expect to receive if you buy)	How acquired	Year of acquisition
Plot ID		Code 1	Decimal	Meter	Feet	Code 2	Code 3	Taka	MID/Code 4			MID/Code 4			Taka	Code 5	Year
Plot ID	Plot Description	G01	G02	G03	G04	G05	G06	G07	G08a	G08b	G08c	G09a	G09b	G09c	G10	G11	G12
1	Homestead																

Household Number: **Module G: Roster of land and pond/water bodies owned or under operation (continued)****Note: List all land (all type of land & water bodies) owned or under operation during 1st December (15th Agrahayon) 2010 - 30th November (14th Agrahayon) 2011.**

Plot ID	Plot Description	In the last 12months who decided to build any infrastructure (if any) on the plot? Report 3 primary decision takers. If HH member, write MID. If outside household, use code 4.			How was the plot utilized in the last season? If response is “3”-“8” then Go to next plot	Who worked on the plot last season?			Generally, who takes decision regarding type of crop to be planted?			Generally, who takes decision regarding inputs? (seeds, fertilizer, irrigation etc)			If any produce was sold from crops planted on [PLOT] in the last growing season, who was responsible for taking the crop to market and negotiating the sale?			If any revenue was generated from crops planted on [PLOT] in the last growing season, who decided how to spend the revenues?		
Plot ID		MID/Code4			Code 6	MID/Code4			MID/Code4			MID/Code4			MID/Code4			MID/Code4		
Plot ID	Plot Description	G13a	G13b	G13c	G14	G15a	G15b	G15c	G16a	G16b	G16c	G17a	G17b	G17c	G18a	G18b	G18c	G19a	G19b	G19c
1	Homestead																			

Code 1:Plot type	Code 2: Soil type	Code 3: Operation status	Code 4: Type of ownership	Code 5: How acquired	Code 6: How was the plot utilized
Homestead 1	Clay1	Fallow 1	All members jointly 71	Purchased/bought 1	Agriculture..... 1
Cultivable/arable land 2	Loam2	Own operated 2	Male outside household.... 72	Inherited (wife's family)2	Fisheries 2
Pasture 3	Sandy.....3	Rented/leased in/cash..... 3	Female outside household..... 73	Inherited (husband's family)3	Grazing for livestock 3
Bush/forest.....4	Clay-loam.....4	Rented/leased in/crop share..... 4	Temporary user right 74	User right (wife's family).....4	Homestead/ house plot..... 4
Waste/non-arable land.....5	Sandy-loam.....5	Mortgaged in.....5	Govt / Khas land/other institutions.. 75	User right (husband's family)5	Bush..... 5
Land in riverbed..... 6		Rented/leased out/cash..... 6	Not applicable/Not decided..... 98	Rented/shared/leased/	Commerical/non ag enterprise 6
Other residential/commercial plot 7		Rented/leased out/crop share..... 7		Mortgaged –in.....6	Fallow..... 7
Cultivable Pond 8		Mortgage out..... 8		Govtment Khas land/Other	Other (specify)..... 8
Derelict pond 9		Group lease d in with other farmer.. 9		institution7	
		Leased out to NGO 10			
		Taken from joint owner..... 11			
		Jointly with other owners..... 12			

Household Number:

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Module H: Agriculture (Male Enumerator)

Note:

- Do not include leased/rented out plots.
- If more than one crop is harvested on the same plot during the recall period, then use separate crop row for each crop.
- Collect plot level data in case of inter-cropping. For more than one crop report information using crop code.
- Crops that are not completely harvested, collect harvested quantity and collect expected harvest (production) of that left in field.
- If plot is divided (at the same time) for different crop production(e.g. intercropping &/mixed cropping), then use decimal for divided plot/sub plot.[e.g. if plot no. 5 is divided into 3 sub plots then write 5.1, 5.2 and 5.3 as plot ID.].
- Write area in decimal of sub plot in H1_03, please note that summation of all sub plots will be less than or equal to the total area of original plot mentioned in Module G.
- Collect the information from the concerned members about the cultivable plots supervised by the women.

Module H1: Agriculture Plot Utilization

Report for plot wise crop data for all Crop cultivated during 1st December (15th Agrahayon) 2010 - 30th November (14th Agrahayon) 2011.

Note: BRING ALL INFORMATION ON HOMESTEAD FARMING (ALL CROPS, AS WELL AS FISH, IF FARMED ALONGSIDE RICE).

In case of intercropping, report the plantation date of the main crop.

If the respondent responds in Bangla months for plantation/broadcast, please convert those weeks and months according to English calendar and write in designated column.

PLOT ID in Module G and Module H must match.

[illegible]

Household Number:

Code 1: Agriculture crop codes					
Major Cereals	Pulses	Vegetables	Leafy vegetables	Fruits (continued)	Other crops (continued)
Aus (local) 11	Lentil(Moshur) 51	Pumpkin..... 101	Pui Shak 201	Lemon 312	Tobacco 601
Aus (LIV) 12	Mung 52	Brinjal (egg plant) 102	Palang Shak (Spinach) 202	Shaddock (pomelo)..... 313	Bettlenut 602
Aus (HYV) 13	Black gram (Mashkalai) 53	Patal..... 103	Lal Shak 203	Black berry 314	Bettleleaf 603
Aman (local) 14	Chickling Vetch(Khesari)..... 54	Okra..... 104	Kalmi Shak 204	Other fruits(lemon like)..... 315	Other Tobacco like crop 604
T. Aman (LIV)..... 15	Chick pea (Chhola)..... 55	Ridge gourd 105	Danta Shak 205	Other fruits 316	Cut flower 605
Aman (HYV) 16	Pigeon pea (Aarohor) 56	Bitter gourd..... 106	Kachu Shak 206	Boroi(Bitter Plum)..... 317	
Aman (hybrid) 17	Field pea (Motor)..... 57	Arum..... 107	Lau Shak 207	Rose Apple 318	Paddy seedbed 701
T. Aus (HYV) 18	Soybean (Gori kalai/	Ash gourd 108	Mula Shak 208	Wood Apple 319	Tomato seedbed 702
Boro (HYV) 19	Kali motor) 58	Cucumber 109	Khesari Shak 209	Ambada/Hoq Plum 320	Brinjal seedbed 703
Boro (hybrid) 20	Other Pulses 59	Carrot..... 110	Other green leafy vegetables . 210	Pomegranate 321	Cauliflower seedbed 704
Wheat (local) 21		Cow pea 111	Potato Leaves 211	Bilimbi 322	Cabbage seedbed 705
Wheat (HYV)..... 22	Oil Seeds	Snake gourd 112	Cabbage 212	Chalta 323	Kohlrabi seedbed..... 706
Maize 23	Sesame 61	Danta 113	Chinese cabbage..... 213	Tamarind(pulp)..... 324	Tobacco seedbed 707
Barley 24	Linseed(tishi)..... 62	Green banana/plantain 114		Olive(wild) 325	Onion seedbed 708
Job 25	Mustard 63	Cauliflower 115	Fruits	Coconut/Green Coconut 326	Chili seedbed 709
Cheena 26	Ground nut/peanut 64	Water gourd 116	Banana 301		Other seedbed 710
Kaun(Italian millet)..... 27	Soybean..... 65	Sweet gourd 117	Mango 302	Other crops	
Joar(Great millet)..... 28	Castor (rerri)..... 66	Tomato..... 116	Pineapple..... 303	Potato 411	
Bojra(Pearl millet) 29	Others Oilseeds 67	Raddish..... 119	Jack fruit 304	Sweet potato 412	By Products (Applicable for
Others 30		Turnip 120	Papaya 305	Mulberry(Tunt)..... 413	Module I only)
Fiber Crops	Spices	Green Papaya 121	Water melon..... 306		Jutestick..... 801
Dhonche..... 41	Chili..... 71	Kakrol..... 122	Bangi/Phuti/Musk melon..... 307	Sugurcan..... 501	Straw 802
Jute 42	Onion..... 72	Yam Stem 123	Litchis 308	Date 502	Other byproduct 803
Cotton 43	Garlic..... 73	Other green Vegetables 124	Guava 309	Palm 503	
Bamboo..... 44	Turmeric..... 74	DrumStick..... 125	Ataa 310	Date Juice..... 504	Other(specify).....900
Other Fibre..... 45	Ginger..... 75	Bean..... 126	Orange..... 311	Tea 504	
	Dhania/Coriander 76	Coriander leaf 127			
	Other spices..... 77				

Code 3: Paddy variety codes				Code 4: Source of seed	
Chandina BR-1 (Boro/Aus)..... 1	Shahjalal BR-18 (Boro)..... 17	Bri Dhan BR-34 (Aman) 33	Bri Dhan BR-50	Aloron 2..... 61	Own 1
Mala BR-2 (Boro/Aus) 2	Mongal BR-19 (Boro) 18	Bri Dhan BR-35 (Boro)..... 34	Banglamoti(Boro) 49	Hira..... 62	Gift(from neighbor/relative etc)...2
Biplob BR-3 (Aus/Aman) 3	Nizami BR-20 (Aus) 19	Bri Dhan BR-36 (Boro) 35	Bri Dhan BR-51 (Aman)..... 50	ACI 5 63	BADC(Govt) 3
Brishail BR-4* (Aman)..... 4	Niamat BR-21 (Aus) 20	Bri Dhan BR-37 (Aman) 36	Bri Dhan BR-52 (Aman) 51	Lal Teer 64	GETCO 4
Dulavhoge BR-5* (Aman)..... 5	Kiron BR-22* (Aman)..... 21	Bri Dhan BR-38 (Aman) 37	Bri Dhan BR-53 (Aman)..... 52	BINA 1 65	NICOL 5
BR-6 (Boro/Aus)..... 6	Dyshary BR-23 ((Aman)..... 22	Bri Dhan BR-39 (Aman) 38	Bri Dhan BR-54 (Aman) 53	BINA 2 66	Mollika Seed Co..... 6
Bribalam BR-7 (Boro/Aus)..... 7	Rahmat BR-24 (Aus)..... 23	Bri Dhan BR-40 (Aman) 39		BINA 3 67	Ispahani 7
Asa BR-8 (Boro/Aus) 8	Noya Pajam BR-25 (Aman) 24	Bri Dhan BR-41 (Aman) 40	Other(specify) 54	BINA 4 68	Aftab 8
Sufoza BR-9 (Boro/Aus)..... 9	Sraboni BR-26 (Aus)..... 25	Bri Dhan BR-42 (Aus)..... 41		BINA 5 69	Supreme..... 9
Progoti BR-10 (Aman)..... 10	Bri Dhan BR-27 (Aus)..... 26	Bri Dhan BR-43 (Aus)..... 42	Hybrid	Bri Hybrid-1(Boro)..... 70	ACI 10
Mukta BR-11 (Aman) 11	Bri Dhan BR-28 (Boro)..... 27	Bri Dhan BR-44 (Aman) 43	Alok 55	Bri Hybrid-2(Boro)..... 71	EAL..... 11
Moyna BR-12 (Boro/Aus) 12	Bri Dhan BR-29 (Boro)..... 28	Bri Dhan BR-45 (Boro) 44	Sonar bangla..... 56	Bri Hybrid-3(Boro)..... 72	Lal Teer 12
Gazi BR-14 (Boro/Aus) 13	Bri Dhan BR-30 (Aman) 29	Bri Dhan BR-46 (Aman) 45	Jagoron..... 57	Bri Hybrid-4(Boro)..... 73	Metali 13
Mohini BR-15 (Boro) 14	Bri Dhan BR-31 (Aman) 30	Bri Dhan BR-47 (Boro) 46	Shakti 1 58		Bayer 14
Shahi Balam BR-16(Boro/Aus) . 15	Bri Dhan BR-32 (Aman) 31	Bri Dhan BR-48 (Aus)..... 47	Shakti 2 59	Other(specify)..... 74	BRAC..... 15
Hasi BR-17 (Boro)..... 16	Bri Dhan BR-33 (Aman) 32	Bri Dhan BR-49 (Aman) 48	Aloron 1 60		Private Shop (do not know seed brand)..... 16

Household Number: **Module H2: Irrigation method and Harvest****Report for plot wise crop data for all Crop cultivated during 1st December (15th Agrahayon) 2010 - 30th November (14th Agrahayon) 2011.****Note:** If the respondent responds in Bangla months for harvest, please convert those months according to English calendar and write in designated column.

Plot ID	Crop code In case of Intercropping report Crop code for the second crop in the shaded column below.	Irrigation							Harvest			
		Source of water	Irrigation Method	Energy used for Irrigation Diesel..... 1 Electric..... 2 Manual..... 3	Payment method for Irrigation Cash..... 1 Cash & crop share... 2 Crop share only 3→H2_06 Own irrigation..... 4→H2_06	Cash cost of Irrigation	Cause of inadequacy/insufficiency of water If reponse is “1” →H2_08	In which month was the water insufficiency greatest (report with respect to the cultivation season) January 1 February .. 2 December 12	Time of harvest		Quantity harvested	If partially harvested report Quantity in field
	Code 1	Code 2 ↓	Code 3	Code ↑		Tk	Code 4	Month (↑)	week	month	(kg)	(kg)
PlotID	Crop Code	H2_01	H2_02	H2_03	H2_04	H2_05	H2_06	H2_07	H2_08	H2_09	H2_10	H2_11

Code 2: Source of water
Rainfed..... 1
River..... 2
Canal..... 3
Pond..... 4
Hoar/Beel (Lake)..... 5
Canalirrigation..... 6
Groundwater..... 7
Code 3: Irrigation Method
Rainfed..... 1
Swing basket 2
Don..... 3
Dugwell..... 4
Hand tubewell 5
Treadle pump 6
Rower pump..... 7
Shallow tubewell..... 8
Deep tubewell..... 9
Low lift pump..... 10
Canalirrigation..... 11
Code 4: Cause of inadequacy & insufficiency of water
Adequate water 1
Lack of rainfall 2
Lack of water in river 3
Lack of water in dam 4
Fall in groundwater level 5
Water too saline..... 6
Arsenic in groundwater 7
Electric failure 8
Lack of diesel 9
Dispute with irrigation organization/supplier 10
Other(specify)..... 11

Household Number:

Instruction for selecting plot(s) to be reported in Modules H3, H4 and H5:

If the farmer is cultivating only owned plots OR cultivating only leased-in/mortgaged-in plots:

- Identify the largest cropped plot in module H1 (using information in column H1_03) and report input usage for all crops cultivated in that plot (including sub plots if any) during *1st December (15th Agrahayon) 2010 -- 30th November (14th Agrahayon) 2011* in Modules H3, H4 and H5.
- If two or more plots/subplots have the same cropped area then choose the plot with non–rice crop cultivation and report input usage for all crops cultivated in that plot (including sub plots if any) during *1st December (15th Agrahayon) 2010 -- 30th November (14th Agrahayon) 2011* in Modules H3, H4 and H5.
- If two or more plots/subplots have the same cropped area and same crop planted (all rice or all non rice crop) then choose any one plot and report input usage for all crops cultivated in that plot (including sub plots if any) during *1st December (15th Agrahayon) 2010 -- 30th November (14th Agrahayon) 2011* in Modules H3, H4 and H5.

If the farmer is cultivating owned plots AND leased-in/ mortgaged-in plots:

- Identify the largest cropped plot under ownership in module H1 (using information in column H1_03) and the largest cropped plot under leased/mortgaged-in agreement in module H1 (using information in column H1_03). **Compare cropped area for owned plots and leased/mortgaged-in plots separately.**
- Report input usage for all crops cultivated in the largest own cropped plot (including sub plots if any) and largest leased/mortgaged-in cropped plot (including sub plots if any) during *1st December (15th Agrahayon) 2010 -- 30th November (14th Agrahayon) 2011* in Modules H3, H4 and H5.
- If two or more plots/subplots have the same cropped area then choose the plot with non–rice crop cultivation and report input usage for all crops cultivated in that plot(including sub plots if any) during *1st December (15th Agrahayon) 2010 -- 30th November (14th Agrahayon) 2011* in Modules H3, H4 and H5.
- If two or more plots/subplots have the same cropped area and same crop planted (all rice or all non rice crop) then choose any one plot and report input usage for all crops cultivated in that plot (including sub plots if any) during *1st December (15th Agrahayon) 2010 -- 30th November (14th Agrahayon) 2011* in Modules H3, H4 and H5.

Household Number:

Module H4: Rental Cost of Tools, Machinery and Draft Animal

Recall period: 1st December (15th Agrahayon) 2010 - 30th November (14th Agrahayon) 2011.

Note: Report rental cost if tools/machinery are rented solely. If tools/machinery is rented along with labor/operator(s) report total rental cost.

[illegible]

Household Number:

Module H5: Labor Usage by Gender for Crop Plantation and Harvesting

Recall period: 1st December (15th Agrahayon) 2010 - 30th November (14th Agrahayon) 2011.

Note: M refers to male labor; F refers to female labor. Include adult and child labor. Round hours to the whole number .Report “0” only if no labor has been used. For e.g. if plot is weeded for 15 min report 1 hour and not “0”.

Plot ID	Crop Code In case of Intercropping report Crop code for the second crop in the shaded column below.	Land preparation (Ploughing, Harrowing, Leveling etc)						Planting (Seeding/Transplanting)						Fertilizer application					
		Family		Hired				Family		Hired				Family		Hired			
		Hours		Hours	Total cost (Tk)	Hours	Total cost (Tk)	Hours		Hours	Total cost (Tk)	Hours	Total cost (Tk)	Hours		Hours	Total cost (Tk)	Hours	Total cost (Tk)
	Code 1	M	F	M	M	F	F	M	F	M	M	F	F	M	F	M	M	F	F
Plot ID	Crop Code	H5_01	H5_02	H5_03	H5_04	H5_05	H5_06	H5_07	H5_08	H5_09	H5_10	H5_11	H5_12	H5_13	H5_14	H5_15	H5_16	H5_17	H5_18

Household Number:

Module H5: Labor Usage by Gender for Crop Plantation and Harvesting (continued)

Recall period: 1st December (15th Agrahayon) 2010 - 30th November (14th Agrahayon) 2011.

Note: M refers to male labor; F refers to female labor. Include adult and child labor. Round hours to the whole number. Report “0” only if no labor has been used. For e.g. if plot is weeded for 15 min report 1 hour and not “0”.

Plot ID	Crop Code*	Pesticide application						Weeding						Irrigation (channel maintenance etc)						Harvest					
		Family		Hired				Family		Hired				Family		Hired				Family		Hired			
		Hr		Hr	Total cost (Tk)	Hr	Total cost (Tk)	Hr		Hr	Total cost (Tk)	Hr	Total cost (Tk)	Hr		Hr	Total cost (Tk)	Hr	Total cost (Tk)	Hr		Hr	Total cost (Tk)	Hr	Total cost (Tk)
	Code 1	M	F	M	M	F	F	M	F	M	M	F	F	M	F	M	M	F	F	M	F	M	M	F	F
Plot ID	Crop Code	H5_19	H5_20	H5_21	H5_22	H5_23	H5_24	H5_25	H5_26	H5_27	H5_28	H5_29	H5_30	H5_31	H5_32	H5_33	H5_34	H5_35	H5_36	H5_37	H5_38	H5_39	H5_40	H5_41	H5_42

*In case of Intercropping report Crop code for the second crop in the shaded column below.

Household Number:

Module H6: Post Harvest Labor, Animal and Tools/ Machinery Usage

Report for all Crop cultivated during 1st December (15th Agrahayon) 2010 - 30th November (14th Agrahayon) 2011.

The questions in this section are at crop level and NOT plot level.

Note: M refers to male labor; F refers to female labor. Include adult and child labor.

Round hours to the whole number only. Report “0” only if no labor has been used. For e.g. if plot is weeded for 15 min report 1 hour and not “0”.

Crop	Carrying from farm to home						Animal used for threshing		Tools/ machinery used for threshing	Threshing					
	Family		Hired				Total days	Total Cost		Family		Hired			
	Hours		Hours	Total cost (Tk)	Hours	Total cost (Tk)				Hours		Hours	Total cost (Tk)	Hours	Total cost (Tk)
Code 1	M	F	M	M	F	F	days	(Tk)	(Tk)	M	F	M	M	F	F
Crop Code	H6_01	H6_02	H6_03	H6_04	H6_05	H6_06	H6_07	H6_08	H6_09	H6_10	H6_11	H6_12	H6_13	H6_14	H6_15

Household Number:

Module H6: Post Harvest Labor, Animal and Tools/ Machinery Usage (continued)

Report for all Crop cultivated during 1st December (15th Agrahayon) 2010 - 30th November (14th Agrahayon) 2011.

The questions in this section are at crop level and NOT plot level.

Note: M refers to male labor; F refers to female labor. Include adult and child labor.

Round hours to the whole number only. Report “0” only if no labor has been used. For e.g. if plot is weeded for 15 min report 1 hour and not “0”.

Crop	Drying crop						Sorting						Packaging					
	Family		Hired				Family		Hired				Family		Hired			
	Hours		Hours	Total cost (Tk)	Hours	Total cost (Tk)	Hours		Hours	Total cost (Tk)	Hours	Total cost (Tk)	Hours		Hours	Total cost (Tk)	Hours	Total cost (Tk)
Code 1	M	F	M	M	F	F	M	F	M	M	F	F	M	F	M	M	F	F
Crop Code	H6_16	H6_17	H6_18	H6_19	H6_20	H6_21	H6_22	H6_23	H6_24	H6_25	H6_26	H6_27	H6_28	H6_29	H6_30	H6_31	H6_32	H6_33

Household Number:

Module H7: Fertilizer, Seed and Pesticides price in different crop seasons

Report for the three seasons during 1st December (15th Agrahayon) 2010 - 30th November (14th Agrahayon) 2011.

Sl no	Name of Fertilizer/ Pesticide	Price of Fertilizer/Seed					
		Rabi		Kharif 1		Kharif 2	
		Did you purchase? Yes..1 No...2→ H8_04	Avg price per Kg	Did you purchase? Yes..1 No...2→ H8_06	Avg price per Kg	Did you purchase? Yes..1 No...2→next row	Avg price per Kg
		Code ↑	Tk/Kg	Code ↑	Tk/Kg	Code ↑	Tk/Kg
H7_01		H7_02	H7_03	H7_04	H7_05	H7_06	H7_07
1	Urea						
2	Amonia						
3	DAP/MAP						
4	TSP / SSP						
5	MP						
6	NPKS						
7	Zink						
8	Gypsum						
9	Calcium /Lime						

Household Number:

Module H8: Location of purchase/rent of Animals, Tool/Machineries, Agricultural labor, Fertilizer, Pesticides etc.

Recall period: 1st December (15th Agrahayon) 2010 - 30th November (14th Agrahayon) 2011.

SI No.	Question	Response	Response code
H8_01	Where did you rent animal used in land preparation and threshing from?		Farm gate (home)..... 1
H8_02	Where did you rent tools and machineries used in crop cultivation from?		Village market (within own village).....2
H8_03	Where did you hire agricultural labor from?		Village market (outside of own village).....3
H8_04	Where did you purchase fertilizer/pesticides/insecticide/herbicide from?		Town market.....4
			Other (specify).....5

Household Number:

Module I: Summary of Agriculture Production and Food grain stock (Male Enumerator)

Module I1: Summary of Agriculture Production (crops, fruits and vegetables)

Crop cultivation in last 1 year, December 1 2010 to November 30, 2011.

Note: Write value of total sale proceeds in taka.

Report both for cultivated and non cultivated produce. For e.g. Report the household's non-cultivated jackfruit harvest from jackfruit trees in homestead.

Crop Code (from module H)	Qty harvested	Qty received from leased plot	Qty paid to land owner of leased plot	Qty Paid for irrigation	Qty paid to labors	Qty consumed	Qty Given away	Animal feed	Wastage		Qty sold If "0" → I1_14	Where sold?	Point of sale		Total Sale Price	Amount kept for Seed for next year	Current stock (on survey day)
									amount	reason			How far is the place? If "1", then put "0"	Time taken to travel If "1", then put "0"			
Crop Code 1	(kg)	(kg)	(kg)		(kg)	(kg)	(kg)	(kg)	(kg)	Code 1	(kg)	Code2	km	min	(Tk)	(kg)	(kg)
Crop code	I1_01	I1_02	I1_03	I1_04	I1_05	I1_06	I1_07	I1_08	I1_09a	I1_09b	I1_10	I1_11	I1_12a	I1_12b	I1_13	I1_14	I1_15

Code1: Reason for loss of output

Flood/rain 1
Pest attack 2
Infested by rats..... 3
Drought..... 4
Storm/cyclone 5
Other(specify).....6

Code 2: Point of Sale

Farm gate (home) 1
Village market (within own village).....2
Village Market (outside own village)...3
Town Market 4
Other (specify).....5

Household Number:

Module I2: Food grain stock and Storage capacity

For last 1 year, December 1 2010 to November 30, 2011

Food grain	End of Month food grain stock												Maximum amount food grain storage / capacity of the household
	Dec 2010	Jan 2011	Feb 2011	Mar 2011	Apr 2011	May 2011	June 2011	July 2011	August 2011	Sep 2011	Oct 2011	Nov 2011	
	kg	kg	kg	kg	kg	kg	kg	kg	kg	Kg	kg	kg	kg
I2_01	I2_02	I2_03	I2_04	I2_05	I2_06	I2_07	I2_08	I2_09	I2_10	I2_11	I2_12	I2_13	I2_14
Paddy													
Rice													
Wheat													

Household Number: **Module J: Agricultural Extension Services and Subsidies (Male Enumerator)****Module J1: Access to Agriculture Extension Services**

For last 1 year , December 1 2010 to November 30 2011.

Question Number	Questions	Response	Code
J1_01	Did any agricultural extension agent visit your farm during the last 12 months?	<input type="text"/>	Yes.....1 No2 >> J1_04
J1_02	How many times did s/he come?		
J1_02a	From government extension service office	<input type="text"/>	(Report frequency of visit. Report '0' if not visited)
J1_02b	From NGO (_____)	<input type="text"/>	(Report frequency of visit. Report '0' if not visited)
J1_02c	From Other (_____)	<input type="text"/>	(Report frequency of visit. Report '0' if not visited)
J1_03	Did you receive advice on the following?		
J1_03a	Fertilizer use	<input type="text"/>	Yes.....1 No2>> J1_03c
J1_03b	Was the advice given useful?	<input type="text"/>	Yes, very.....1 Yes, somewhat.....2 No3
J1_03c	Seed use	<input type="text"/>	Yes.....1 No2 >> J1_03e
J1_03d	Was the advice given useful?	<input type="text"/>	Yes, very.....1 Yes, somewhat.....2 No3
J1_03e	Irrigation use	<input type="text"/>	Yes.....1 No2 >> J1_03g
J1_03f	Was the advice given useful?	<input type="text"/>	Yes, very.....1 Yes, somewhat.....2 No3
J1_03g	Pesticide use	<input type="text"/>	Yes.....1 No2 >> J1_03i
J1_03h	Was the advice given useful?	<input type="text"/>	Yes, very.....1 Yes, somewhat.....2 No3
J1_03i	Pest and Diseases	<input type="text"/>	Yes.....1 No2>> J1_03k
J1_03j	Was the advice given useful?	<input type="text"/>	Yes, very.....1 Yes, somewhat.....2 No3
J1_03k	Cropping practice	<input type="text"/>	Yes.....1

Household Number:

Question Number	Questions	Response	Code
			No.....2>> J1_03m
J1_03l	Was the advice given useful?	<input type="text"/>	Yes, very.....1 Yes, somewhat.....2 No.....3
J1_03m	Soil type	<input type="text"/>	Yes.....1 No.....2>> J1_03o
J1_03n	Was the advice given useful?	<input type="text"/>	Yes, very.....1 Yes, somewhat.....2 No.....3
J1_03o	Others(-----)	<input type="text"/>	Yes.....1 No.....2>> J1_04
J1_03p	Was the advice given useful?	<input type="text"/>	Yes, very.....1 Yes, somewhat.....2 No.....3
J1_04	Did you go to any extension agent?	<input type="text"/>	Yes.....1 No.....2 >> J1_07
J1_05	How many times did you visit the following?		
J1_5a	Government extension service office	<input type="text"/>	(Report frequency of visit. Report '0' if not visited)
J1_5b	NGO (_____)	<input type="text"/>	(Report frequency of visit. Report '0' if not visited)
J1_5c	Other (_____)	<input type="text"/>	(Report frequency of visit. Report '0' if not visited)
J1_06	Did you receive advice on the following?		
J1_06a	Fertilizer use	<input type="text"/>	Yes.....1 No.....2>> J1_06c
J1_06b	If yes, was the advice given useful?	<input type="text"/>	Yes, very.....1 Yes, somewhat.....2 No.....3
J1_06c	Seed use	<input type="text"/>	Yes.....1 No.....2 >> J1_06e
J1_06d	If yes, was as the advice given useful?	<input type="text"/>	Yes, very.....1 Yes, somewhat.....2 No.....3
J1_06e	Irrigation use	<input type="text"/>	Yes.....1 No.....2 >> J1_06g
J1_06f	If yes, was as the advice given useful?	<input type="text"/>	Yes, very.....1 Yes, somewhat.....2 No.....3
J1_06g	Pesticide use	<input type="text"/>	Yes.....1 No.....2 >> J1_06i
J1_06h	If yes, was as the advice given useful?	<input type="text"/>	Yes, very.....1

Household Number:

Question Number	Questions	Response	Code
			Yes, somewhat..... 2 No..... 3
J1_06i	Pest and Diseases	<input type="text"/>	Yes..... 1 No..... 2>> J1_06k
J1_06j	If yes, was as the advice given useful?	<input type="text"/>	Yes, very..... 1 Yes, somewhat..... 2 No..... 3
J1_06k	Cropping practice	<input type="text"/>	Yes..... 1 No..... 2>> J1_06m
J1_06l	If yes, was as the advice given useful?	<input type="text"/>	Yes, very..... 1 Yes, somewhat..... 2 No..... 3
J1_06m	Soil type	<input type="text"/>	Yes..... 1 No..... 2>> J1_06o
J1_06n	If yes, was as the advice given useful?	<input type="text"/>	Yes, very..... 1 Yes, somewhat..... 2 No..... 3
J1_06o	Others(-----)	<input type="text"/>	Yes..... 1 No..... 2>> NEXT MODULE
J1_06p	If yes, was as the advice given useful?	<input type="text"/>	Yes, very..... 1 Yes, somewhat..... 2 No..... 3
J1_07	If no, why? (report primary reason) (answer this question is answers to J1_01 and J1_04 are no)	<input type="text"/>	Did not face any problems 1 Extension officer unhelpful..... 2 Extension officer not knowledgeable 3 Extension office too far away 4 Do not know of any extension service office 5 Others 6

Household Number: **Module J2: Government agriculture input subsidy card related information**

For last 1 year, December 1 2010 to November 30 2011.

Question Number	Question	Response		Code
J2_01	Do you have an agriculture input subsidy card?	<input type="text"/>		Yes..... 1 No..... 2 >> END MODULE
J2_02	If yes, how many?	<input type="text"/>		Put number
J2_03	How did you come to know about this card? (report primary source of information on subsidy card)	<input type="text"/>		Assistant agriculture officer/ (block supervisor) 1 Local UP member 2 Gramya Police 3 Others(specify) 4
J2_04	On how much land are you getting subsidy?	<input type="text"/>		Decimals
J2_05	What crops are you are getting subsidy for?			
J2_05a	Rice	<input type="text"/>		Yes..... 1 No..... 2
J2_05b	Jute	<input type="text"/>		Yes..... 1 No..... 2
J2_05c	Sugarcane	<input type="text"/>		Yes..... 1 No..... 2
J2_05d	Others (specify)	<input type="text"/>		Yes..... 1 No..... 2
J2_06	What is the amount of subsidy for Rice crop:	2011 <input type="text"/>	2010 <input type="text"/>	Write the amount of money received as subsidy for each year. If no subsidy was received during a particular year, write '0' in the corresponding column
J2_07	What is the amount of subsidy for Jute crop:	2011 <input type="text"/>	2010 <input type="text"/>	
J2_08	What is the amount of subsidy for Sugarcane	2011 <input type="text"/>	2010 <input type="text"/>	
J2_09	What is the amount of subsidy for Others(-----)	2011 <input type="text"/>	2010 <input type="text"/>	
J2_10	Did you have to pay any money to get this subsidy card?	<input type="text"/>		Yes..... 1 No..... 2
J2_11	Do you get subsidy in kind instead of cash?	<input type="text"/>		Yes..... 1 No..... 2>>J2_13
J2_12	If yes, report amount of in kind of subsidies received for the following items:			
J2_12a	Rice seed	<input type="text"/>		(kg)
J2_12b	Vegetable seeds (cauliflower, onion, etc.)	<input type="text"/>		(kg)

Household Number:

Question Number	Question	Response	Code
J2_12c	Urea	<input type="text"/>	(kg)
J2_12d	TSP	<input type="text"/>	(kg)
J2_12e	MP	<input type="text"/>	(kg)
J2_12f	Animal feed	<input type="text"/>	(kg)
J2_13	Do you get any agriculture machinery as subsidy?	<input type="text"/>	Yes..... 1 No..... 2 ≥ J2_16
J2_14	If yes, did you receive the following :		
J2_14a	Power tiller	<input type="text"/>	Yes..... 1 No..... 2
J2_14b	Tube well(specify)	<input type="text"/>	Yes..... 1 No..... 2
J2_14c	Fertilizer(granular) application equipment	<input type="text"/>	Yes..... 1 No..... 2
J2_14d	Other(-----)	<input type="text"/>	Yes..... 1 No..... 2
J2_15	How many farmers share this machinery?	<input type="text"/>	(Number of members in group)
J2_16	Do you get any subsidy on electricity bill?	<input type="text"/>	Yes..... 1 No..... 2
J2_17	Do you get any subsidy on electricity bill?	<input type="text"/>	Yes..... 1 No..... 2

Household Number: **Module K: Livestock and Poultry (Male Enumerator)****Module K1: Livestock and poultry**

For last 1 year , December 1 2010 to November 30 2011.

Animal Name	Animal Code	Type of asset* Consumption only 1 Consumption & Productive 2 Productive only .. 3	On December 1, 2010, how many were there and what was their value?		On November 30, 2011, how many were there and what was their value?		How many does the household own?	Report 3 primary owners. If HH member, write MID. If outside household, use code 1.	Who looks after livestock/poultry?			In last 12 months (December 1 2010 to November 30 2011.)							
			No	Total value	No	Total value			Report 3 primary owners. If HH member, write MID. If outside household, use code 1.			How many were born?	How many were purchased?	Where did you buy animal/bird from?	Who decided to buy livestock and poultry?				
	Code	Code ↑	No	Tk	No	Tk	No	MID/Code 1				No.	No.	Code ↑	MID/Code 1				
Name	Livestock Code	K1_01	K1_02a	K1_02b	K1_03a	K1_03b	K1_04	K1_05a	K1_05b	K1_05c	K1_06a	K1_06b	K1_06c	K1_07	K1_08	K1_09	K1_10a	K1_10b	K1_10c
Bullock	1																		
Milk Cow	2																		
Buffalo	3																		
Goat	4																		
Sheep	5																		
Chicken	6																		
Duck	8																		
Other birds (specify)	9																		
Others (specify)	10																		

Household Number: **Module K1: Livestock and poultry (continued)**

Animal Name	Animal Code	In last 12 months (December 1 2010 to November 30 2011.), how many were							Where did you sell animal? Farm gate (home)1 Village market (within own village).....2 Village market (outside of own village).....3 Town market.....4 Other (specify).....5	Total value of selling	Who decided to sell ? Report 3 primary owners. If HH member, write MID. If outside household, use code 1.	Who controls the sales proceed of the sale of livestock products Report 3 primary owners. If HH member, write MID. If outside household, use code 1.	If you raise poultry, have any of your poultry been affected by bird flu within the last 12 months? Yes 1 No..... 2 Not applicable.... 9				
		Received as gift/Inherited ?	Given as gift?	Received from lease	Lost		Consumed by household	Sold (if not sold, write '0', and go to next row. If duck/chicken/bird then go to K1_21)									
	Code	No	No	No	No	Taka	No	No	Code ↑	Tk	MID/Code1			MID/Code1			
Name	Code	K1_11	K1_12	K1_13	K1_14a	K1_14b	K1_15	K1_16	K1_17	K1_18	K1_19a	K1_19b	K1_19c	K1_20a	K1_20b	K1_20c	K1_21
Bullock	1																
Milk Cow	2																
Buffalo	3																
Goat	4																
Sheep	5																
Chicken	6																
Duck	8																
Other birds (specify)	9																
Others (specify)	10																

Household Number: **Module K2: Livestock and Poultry Products**

For last 1 year , December 1 2010 to November 30 2011.

Animal Product		Unit name	How much did you produce in the last 12 months?		How much did you consume in the last 12 months?		How much did your household give to others?	How much did your household use for reproduction?	How much was spoiled?	How much was stored/used as stock?	How much did your household sell in the last 12 months? (if no sales >>next animal product)	Where did you sell your production?	Total value of selling	Who controls the money from the sale of livestock products? Report 3 primary owners. If HH member, write MID. If outside household, use code 1.		
			Quantity	How much would you receive if you sold this product?	Quantity	How much would you receive if you sold this product?										
Name	Code						Qty	Qty	Qty	Qty	Qty	Code 2	Taka			
Product Name	BP Code	K2_01	K2_02	K2_03	K2_04	K2_05	K2_06	K2_07	K2_08	K2_10	K2_10	K2_11	K2_12	K2_13a	K2_13b	K2_13c
Milk*	1	Liter														
Eggs*	2	Number														
Manure*	3	Kg														

Note:* Taka per unit sold.

Code 1:	Code 2: Where sold
All members jointly 71	Farm gate (home) 1
Male outside household.... 72	Village market (within own village) 2
Female outside household..... 73	Village market (outside own village)..... 3
Govt / Khas land/other institutions..... 74	Town market..... 4
Not applicable98	Other (specify) 5

Household Number: **Module K3: Expenditure for Livestock and Poultry Production**

For last 1 year , December 1 2010 to November 30 2011.

	Animal/Poultry	Fodder /feed bought	Medicine/ treatment cost	Labor use in person days						Other expenses if purchased
				Family*		Hired*		Hired*		
				Male	Female	Male	Male	Female	Female	
Animal/Poultry	Code	(Tk)	(Tk)	(hours)	(hours)	(hours)	Total cost	(hours)	Total cost	(Tk)
Name	K3_01	K3_02	K3_03	K3_04	K3_05	K3_06	K3_07	K3_08	K3_09	K3_10
Cow/Bullock/Buffalo	1									
Goat/Sheep	2									
Chicken/Duck	3									
Others (please specify)	4									

Note: * Include adult and child labor.

Round hours to the whole number .Report “0” only if no labor has been used. For e.g. if plot is weeded for 15 min report 1 hour and not “0”.

Sl no	Question	Response	Response Code
K3_11	Where did you hire most of the laborers from?	<input type="text"/>	From farm/home..... 1 Village market (within own village)..... 2 Village market (outside own village)..... 3 City market..... 4 Others (please specify) 5

Household Number: **Module L: Fisheries (Male Enumerator)****Module L1: Fish/Shrimp**

Plot/pond/water bodies utilization in last 1 year: December 1 2010 to November 30 2011.

Pond ID	Area (write '0' if fishing is done from open water body)	Name of Fish &/ Crop*	Fish and Crop Code* Write all types of fishes/crops harvested in last 1 year							Labor use in person days			Cost of inputs				How many times harvested in last 1 year	Total qty of collection/harvest	Loss of output	
										Family**	Hired**	Daily wage for hired labor	Fingerlings	Feed	Other	Total Cost			Qty	Reason
	Decimal	(Maximum 6 types of fish and 1 crop)	Fish1	Fish2	Fish3	Fish4	Fish5	Fish6	Crop1	(hours)	(hours)	(Tk/day)	Tk	Tk	Tk	Tk	No.	kg	Kg	Code 2
Plot ID	L1_01	Fish and crop name	L1_02_01	L1_02_02	L1_02_03	L1_02_04	L1_02_05	L1_02_06	L1_02_07	L1_03	L1_04	L1_05	L1_06	L1_07	L1_08	L1_09	L1_10	L1_11	L1_12	L1_13

Note:* For Fish refer the fish code(Code 1) that appears at the end of Module L. For Crop refer to crop code (code 1) used for module H.

* For each plot, write the name of all fish harvested, separated by commas. If fish is farmed in paddy field, write the name of 1 crop

*** Include adult and child labor. Round hours to the whole number .Report "0" only if no labor has been used. For e.g. if plot is weeded for 15 min report 1 hour and not "0".

Fill **separate** row for each pond. The pond reported in the Module L must be reported in the Module G. Plot ID of pond in Module G will be the Plot ID for pond in the Module L. If fish were collected from the open water, write 999 as Plot ID.

Sl no	Question	Response	Response Code
L1_14	Where did you hire most of the laborers from?	<input type="text"/>	From farm/home..... 1 Village market (within own village)..... 2 Village market (outside own village)..... 3 City market..... 4 Others (please specify) 5

Household Number: **Module L2: Fish/Shrimp Pond Production and Inputs**

Plot/pond/water bodies utilization in last 1 year: December 1 2010 to November 30 2011.

Name of Fish	Fish Code	Unit of measure Kg..... 1 Nos. 2	Total Production under own/share in operation	Harvest received from the shared out pond	Share of harvest given to owner (if shared pond)	Quantity consumed	Paid to the laborers	Quantity for dry fish	Given to Others	Qty sold If “0” >>next case	Where sold?	Total value of selling
Name of Fish	[Code 1]	Code ↑	QTY	QTY	QTY	QTY	QTY	QTY	QTY	QTY	[Code 3]	Tk
Name	L2_01	L2_02	L2_03	L2_04	L2_05	L2_06	L2_07	L2_08	L2_09	L2_10	L2_11	L2_12

Code 1: Fish Codes			Code 2: Reason of loss code		Code 3: Where sold
Silver carp..... 1	Telapia/Nailotica 10	Prawn (Golda Chingri) 18	Flood..... 1		Farm gate (home)..... 1
Grass carp 2	Pona..... 11	Shrimp (Bagda Chingri) 19	Water Toxicity 2		Village market (within own village) 2
Mirror carp 3	Koi..... 12	Tengra/Baim..... 20	Theft..... 3		Village market (outside of own village) 3
Common carp..... 4	Magur 13	Mola/Dhela/Kachki/Chapila 21	Due to cold..... 4		Town market..... 4
Karfu..... 5	Shingi 14	Ilish/hilsha 22	Other (Specify)..... 5		Other (specify) 5
Rui 6	Khalse 15	Other Large fish 23			
Katla 7	Shol/Gajar/Taki 16	Other Small fish 24			
Mrigel 8	Puti/Swarputi 17	Sea fish 25			
Kalibaus 9		Pangash 26			

Household Number:

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Module M: Marketing of Agriculture, Livestock and Fisheries Products (Male Enumerator)

Module M1: Marketing of Paddy, Rice, Banana, Mango and Potato

Information regarding the sale of paddy, rice, banana, mango and potato. Recall period is last 1 year: DECEMBER 1 2010 to NOVEMBER 30, 2011.

LIST ALL SALES; EACH LINE SHOULD BE A SEPARATE TRANSACTION (SALE), NOT AGGREGATE SALES FOR THAT PRODUCT.

[illegible]

Household Number: **Module M2: Marketing of livestock, Jute, Wheat, Pulses, Fish, Fruits, Vegetables etc**

REPORT FOR LAST TRANSACTION IN THE PAST 1 YEAR: DECEMBER 1 2010 to NOVEMBER 30, 2011.

EXCLUDE THE FOLLOWING ITEMS: PADDY, RICE, BANANA, MANGO AND POTATO. LIST ALL SALES; EACH LINE SHOULD BE A SEPARATE TRANSACTION (SALE), NOT AGGREGATE OVER SALES FOR THAT PRODUCT.

No.	Product	Mth of sale	Buyer	Major reason for the choice of this buyer	Total qty sold in this sale	Unit code of this sale Mond 1 Kg 2 Numbers ... 3 Sacks 4 Kandi 5 (if unit is kg, skip M2_08)	Kgs per unit sold?	Price rec'd per unit	Total amt rec'd in sale	Modes of payment	% paid in cash and immediately (if 100 percent go to m2_14)	If buyer paid later, then after how many days ? (put “-“ if 100% is paid in cash at the time of transaction)	Did you contact buyer over cell phone before sale? Yes...1 No....2 >M2_16	If yes, to M14, was price agreed on cell phone ? Yes...1 No....2	Sale location	Dist and time taken to go to the place where you sold your produce?		Transport means	Transaction time on location of sale	Does the buyer provide any input as advance to the farmer? Yes...1 No....2
	[Code 1]	No.	[Code 2]	[Code 3]	No	Code ↑	kg	Tk	Tk	[Code 4]	%	days			[Code 5]	hour	km	[Code 6]	Hour	
M2_01	M2_02	M2_03	M2_04	M2_05	M2_06	M2_07	M2_08	M2_09	M2_10	M2_11	M2_12	M2_13	M2_14	M2_15	M2_16	M2_17	M2_18	M2_19	M2_20	M2_21

Household Number:

Code list for Module M:

Code 1	Customer code 2	Payment code 4	Transportation code 6
Paddy/ rice 1	Village collector 1	Cash.....1	Porter/ Self carrying..... 1
Rice..... 2	Wholesale 2	Ingredients.....2	Rickshaw 2
Wheat (a food crop) 3	Cold storage owner..... 3	Part cash &	Van 3
Potato..... 4	Cold storage wholesale 4	part goods.....3	Push van 4
Dal 5	Collection center	Cheque4	Tractor 5
Duck/Chicken 6	of company 5	Others (please specify)5	Truck 6
Cow/Buffalo/	Processing farm 6		Motorcar 7
Milk cow..... 7	Co-operative society 7	Farmer's sale center code 5	Bicycle..... 8
Goat/ Lamb 8	Farmer society 8	Farmer's field /	Motor bicycle..... 9
Fish 9	Retailer 9	own village 1	Horse cart..... 10
Shrimp 10	Consumer 10	District wholesale market 2	Bullock cart 11
Banana 11	Hotel/ restaurant 11	Other district	Others (please specify)..... 12
Papaya..... 12	Others (please specify) 12	Wholesale market3	
Jack fruit 13		Dhaka wholesale market.....4	
Mango..... 14	Customer's choice code 3	Other wholesale market.....5	
Guava..... 15	Pays high/good price 1	Local retail market.....6	
Egg plant..... 16	Buys a bulk..... 2	Cold storage 7	
Tomato..... 17	Buys limited quantity..... 3	Wholesale	
Pumkin..... 18	Makes advance	collection center 8	
Palang shak 19	Payment 4	Others (please specify) 9	
Lal shak 20	Makes immediate		
Pui shak 21	Payment 5		
	Lives nearby 6		
	No other option..... 7		

Household Number: **Module N: Non-agricultural Enterprises (Male Enumerator)**

Note to enumerator: Ask member who is most knowledgeable about household's economic activities

Question Number	MID	Question	Response	Response Code
N_1	<input type="text"/>	Has anyone in your household owned or operated any non-farm economic activity or business in the last 12 months?	<input type="text"/>	Yes..... 1 >>go to next question No..... 2 → End module

Enterprise	What type of business is/was this?		Who in the household made the decision to start the business?			Who in the household would you consider the owners of the business?			What was your profit in the last 12 months(exc luding expenditure s)	For how long has this enterprise been operating?		Is the business still in operation?	Who in the household made the decision to sell/end the business activities?			Who in the household had control over any money from the sale or closure of the business?			Who in the household is/was the principal manager/administr ator of the business (responsible for day to day operations)?			Who in the household work/worked in the business?		
			If household member write member ID. If not, use code 2.			If household member write member ID. If not, use code 2.							If household member write member ID. If not, use code 2.			If household member write member ID. If not, use code 2.			If household member write member ID. If not, use code 2.			If household member write member ID. If not, use code 2.		
No	Activity Descripti on	Business Code 1	Mid/ code 2	Mid/ code 2	Mid/ code 2	Mid/ code 2	Mid/ code 2	Mid/ code 2	(Taka)	Yr	Month		Mid/co de2	Mid/ code 2	Mid/ code 2	Mid/ code 2	Mid/ code 2	Mid/ code 2	Mid/ code 2	Mid/ code 2	Mid/ code 2	Mid/ code 2	Mid/ code 2	Mid/ code 2
BID	N01	N02	N03 a	N03 b	N03 c	N04 a	N04 b	N04 c	N05	N0 6a	N06b	N07	N08a	N08 b	N08 c	N09 a	N09 b	N09 c	N10 a	N10 b	N10 c	N11 a	N11 b	N11 c
i																								
ii																								
iii																								
iv																								
v																								

Household Number: **Module N: Non-agricultural Enterprises (continued....)**

Enterprise	What type of business is/was this?		Who in the household controls/controlled the money earned from the business? If household member write member ID. If not, use code 2.			Where do you operate the enterprise? Home...1 Fixed location Outside home...2 No fixed place...3 Other(specify)...4	How many months did the enterprise operate in the past 12 months?	What is your share of equity in this enterprise?	What share of profit is kept by your HH?	Who are your main customers? Other Household/ Individuals..1 Govt/other public Firm.....2 Private enterprise..3 Other(specify)...4		Where do you sell ? From farm/home..... Village market (within own village)..... Village market (outside own village)..... City market Others (please specify)	Is the enterprise registered with the govt. or local govt.? Yes..1 No...2 N/A...3	What was your main source of finance for setting up the business? (write down the 2 most important)		How many people did you employ over the past 12 months?	What problems if any have you had in running your business? (write down the 2 most important)	
No	Activity Description	Business Code 1	Mid/code 2	Mid/code 2	Mid/code 2		Month	(%)	(%)					Code 3	Code 3		Cod e 4	Cod e 4
BID	N01	N02	N12a	N12b	N12b	N13	N14	N15	N16	N17a	N17b	N18	N19	N20a	N20b	N21	N22a	N22b
i																		
ii																		
iii																		
iv																		
v																		
vi																		

Household Number: **Code list for module N:**

Business Code1	Ownership/Decisionmaking Code 2	Source of finance code 3	Business Problems code 4
Nursery1	All members jointly 71	Inherited/ through gift..... 1	No major problem 1
Fishing 2	Male outside household..... 72	Own savings 2	Inadequate capital or credit 2
Mining and quarrying3	Female outside household 73	Borrowing from	Inadequate tech. knowledge 3
Manufacturing.....4	Govt / Khas land/other institutions..... 74	relatives/ friends 3	Lack of required expertise.....4
Electricity, gas and water supply.....5	Not applicable 98	Agricultural Dev. Bank 4	High-cost of running rent. 5
Construction.....6		Commercial bank 5	Water supply problem 6
Wholesale and retail trade; repair		Grameen bank 6	Power supply problem 7
of motor vehicles, motorcycles, and		Other financial Inst. 7	Problems with equipment/
personal and household goods.....7		NGO/ Relief agency 8	spare parts 8
Hotels and restaurants8		Sale of assets 9	Government regulations 9
Transport, storage and		Money lender 10	Lack of raw materials..... 10
Communications9		Other(specify) 11	Lack of customers 11
Financial intermediation10		Not applicable 12	Transport problems 12
Real estate and business11			Business problems owing to deterioration of laws ad
Administration , security and social safety			regulations..... 13
.....12			Other 14
Education/Science.....13			Not applicable..... 15
Health and Social work.....14			
Other social services15			
Own household production16			
Work Out of state.....17			
Food processing21			
Garments.....22			
Wooden furniture.....23			
Publishing/printing.....24			
Other industries.....25			
Fish farming.....26			
Forestry.....27			
Wholesale28			
Retailer29			
Other business.....30			
Transportation31			
Communications32			
Army/police/BDR33			
Arts/culture34			
Sports/tourism/leisure35			
Baking/finances/loans36			
Management and administration37			
Non agricultural day labourer38			
Others39			

Household Number: **Module O: Food Consumption (Female Enumerator)****Module O1: Purchases, Home Production and Other Sources**

Collect information for last 7 days.

Name of the item	Code	Did your household consume it in the last 7 days Yes...1 No....2	Total quantity consumed	Unit of measure? Kg..... 1 Grams..... 2 Liter..... 3 Number.... 4	If the unit of measure is number, then write the average weight in grams	Quantity consumed from purchased food				Quantity from own production	Quantity from other sources	
						Quantity consumed	Unit price	Total value	Did you purchase on credit? (note: if more than half bought on credit, write 'yes') Yes...1 No....2		Quantity	Source
				Code ↑				(Tk)				[Code1]
	O1_01	O1_02	O1_03	O1_04	O1_05	O1_06	O1_07	O1_08	O1_09	O1_10	O1_11	O1_12
Cereals												
Parboiled rice (coarse)	1											
Non-parboiled rice (coarse)	2											
Fine rice	3											
Rice flour	4											
Suji (cream of wheat/barley)	5											
Wheat	6											
Atta	7											
Maida (wheat flour w/o bran)	8											
Semai/noodles	9											
Chaatu	10											
Chira (flattened rice)	11											
Muri/Khoi (puffed rice)	12											
Barley	13											
Sagu	14											
Corn	15											
Cerelac	16											
Other	901											
Pulses												
Lentil	21											
Chick pea	22											

Household Number:

Name of the item	Code	Did your household consume it in the last 7 days Yes...1 No....2	Total quantity consumed	Unit of measure? Kg..... 1 Grams 2 Liter..... 3 Number.... 4	If the unit of measure is number, then write the average weight in grams	Quantity consumed from purchased food				Quantity from own production	Quantity from other sources	
						Quantity consumed	Unit price	Total value	Did you purchase on credit? (note: if more than half bought on credit, write 'yes') Yes...1 No....2		Quantity	Source
				Code ↑				(Tk)				[Code1]
	O1_01	O1_02	O1_03	O1_04	O1_05	O1_06	O1_07	O1_08	O1_09	O1_10	O1_11	O1_12
Anchor daal	23											
Black gram	24											
Khesari	25											
Mung	26											
Pea	27											
Shem bitchi	28											
Other pulses	902											
Edible oil												
Soybean	31											
Mustard	32											
Dalda/banspati	33											
Ghee	34											
Palm oil	35											
Sesame oil	36											
Other oil	903											
Vegetables												
Patal	41											
Bitter gourd	42											
Okra	43											
Eggplant	44											
Tomato	45											
Pumpkin	46											
Sweet gourd	47											
Ash gourd	48											
Long bean	49											
Water gourd	50											
Sheem	51											
Carrot	52											
Radish	53											
Cauliflower	54											

Household Number:

Name of the item	Code	Did your household consume it in the last 7 days Yes...1 No....2	Total quantity consumed	Unit of measure? Kg..... 1 Grams 2 Liter..... 3 Number.... 4	If the unit of measure is number, then write the average weight in grams	Quantity consumed from purchased food				Quantity from own production	Quantity from other sources	
						Quantity consumed	Unit price	Total value	Did you purchase on credit? (note: if more than half bought on credit, write 'yes') Yes...1 No....2		Quantity	Source
				Code ↑				(Tk)				[Code1]
	O1_01	O1_02	O1_03	O1_04	O1_05	O1_06	O1_07	O1_08	O1_09	O1_10	O1_11	O1_12
Green banana	55											
Papaya	56											
Green chili	57											
Cucumber	58											
Kachu (arum)	59											
Danta (amaranth)	60											
Potato	61											
Sweet potato	62											
Green mango	63											
Onion	64											
Garlic	65											
Dhundal	66											
Shapla	67											
Kachur lati	68											
Jhinga (ribbed gourd)	69											
Green pea	70											
Fig	71											
Drum stick	72											
Snake gourd	73											
Green jackfruit	74											
Kolar mocha	75											
Mete alu	76											
Beher gura	77											
Soybean bori	78											
Jack fruit seed	79											
Cabbage	80											
Kakrol	81											
Shalgom	82											
Other	904											
Leafy vegetables												

Household Number:

Name of the item	Code	Did your household consume it in the last 7 days Yes...1 No....2	Total quantity consumed	Unit of measure? Kg..... 1 Grams 2 Liter..... 3 Number.... 4	If the unit of measure is number, then write the average weight in grams	Quantity consumed from purchased food				Quantity from own production	Quantity from other sources	
						Quantity consumed	Unit price	Total value	Did you purchase on credit? (note: if more than half bought on credit, write 'yes') Yes...1 No....2		Quantity	Source
				Code ↑				(Tk)				[Code1]
	O1_01	O1_02	O1_03	O1_04	O1_05	O1_06	O1_07	O1_08	O1_09	O1_10	O1_11	O1_12
Pui (Indian spinach)	86											
Lal Shak (red amaranth)	87											
Bathua	88											
Bokful	89											
Cabbage	90											
Danta Shak	91											
Helencha	92											
Kalmi Shak	93											
Kachu Shak	94											
Kalo kachu Shak	95											
Katanate	96											
Lau Shak	97											
Pat Shak	98											
Dheki Shak	99											
Dhania Shak	100											
Palang Shak (spinach)	101											
Onion/garlic stalk	102											
Pea leaves	103											
Drumstick leaves	104											
Mustard leaves	105											
Radish leaves	106											
Mixed leafy vegetables	107											
Dudhali Pata	108											
Black gram leaves	109											
Shechi Shak	110											
Swett gourd leaves	111											
Khesari Shak	112											
Geema Shak	113											
Neem Shak	114											
Darkuni Shak	115											

Household Number:

Name of the item	Code	Did your household consume it in the last 7 days Yes...1 No....2	Total quantity consumed	Unit of measure? Kg..... 1 Grams 2 Liter..... 3 Number.... 4	If the unit of measure is number, then write the average weight in grams	Quantity consumed from purchased food				Quantity from own production	Quantity from other sources	
						Quantity consumed	Unit price	Total value	Did you purchase on credit? (note: if more than half bought on credit, write 'yes') Yes...1 No....2		Quantity	Source
				Code ↑				(Tk)				[Code1]
	O1_01	O1_02	O1_03	O1_04	O1_05	O1_06	O1_07	O1_08	O1_09	O1_10	O1_11	O1_12
Other leafy vegetables	905											
Meat, eggs and milk												
Beef/buffalo	121											
Mutton	122											
Chicken	123											
Duck	124											
Pigeon	125											
Bids/bok/gughu	126											
Liver	127											
Stomach of beef/goat	128											
Dried meat	129											
Egg	130											
Fish egg	131											
Milk	132											
Powdered Milk	133											
Condensed Milk	134											
Butter	135											
Other meat	906											
Fruits												
Mango	141											
Banana	142											
Papaya	143											
Orange	144											
Apple	145											
Coconut	146											
Jack Fruit	147											
Litchis	148											
Black berry	149											
Bel	150											
Pomelo	151											

Household Number:

Name of the item	Code	Did your household consume it in the last 7 days Yes...1 No....2	Total quantity consumed	Unit of measure? Kg..... 1 Grams 2 Liter..... 3 Number.... 4	If the unit of measure is number, then write the average weight in grams	Quantity consumed from purchased food				Quantity from own production	Quantity from other sources	
						Quantity consumed	Unit price	Total value	Did you purchase on credit? (note: if more than half bought on credit, write 'yes') Yes...1 No....2		Quantity	Source
				Code ↑				(Tk)				[Code1]
	O1_01	O1_02	O1_03	O1_04	O1_05	O1_06	O1_07	O1_08	O1_09	O1_10	O1_11	O1_12
Grapes	152											
Amra	153											
Karambola	154											
Guava	155											
Jujube/dried jujube	156											
Olive	157											
Tamarind	158											
Dalim	159											
Lemon	160											
Dates	161											
Sugarcane	162											
Green Coconut	163											
Ata (bullock's heart)	164											
Chalta	165											
Tarmuj (Water melon)	166											
Bangi (Musk melon)	167											
Pine apple	168											
Sobeda	169											
Jaamrul	170											
Other fruit	907											
Fish (large)												
Rui	176											
Katla	177											
Mrigel	178											
Kalibaus	179											
Surma	180											
Chital	181											
Boal	182											
Aair	183											
Pangash	184											

Household Number:

Name of the item	Code	Did your household consume it in the last 7 days Yes...1 No....2	Total quantity consumed	Unit of measure? Kg..... 1 Grams 2 Liter..... 3 Number.... 4	If the unit of measure is number, then write the average weight in grams	Quantity consumed from purchased food				Quantity from own production	Quantity from other sources	
						Quantity consumed	Unit price	Total value	Did you purchase on credit? (note: if more than half bought on credit, write 'yes') Yes...1 No....2		Quantity	Source
				Code ↑				(Tk)				[Code1]
	O1_01	O1_02	O1_03	O1_04	O1_05	O1_06	O1_07	O1_08	O1_09	O1_10	O1_11	O1_12
Ritha	185											
Hilsa	186											
Jatka	187											
Grass Carp	188											
Mirror Carp	189											
Silver Carp	190											
Telapia	191											
Swarputi	192											
Chital	193											
Taki	194											
Mague	195											
Singi	196											
Baim	197											
Koi	198											
Meni	199											
Shapla/padda/rupsha fish	200											
Bagda Chingree	201											
Golda Chingree	202											
Tortoise meat	203											
Poona fish	204											
Dried fish	205											
Other big fish	908											
Fish (small)												
Gura mach	211											
Panch mishali	212											
Puti	213											
Tengra	214											
Pabda	215											
Moa/mola	216											
Dhela	217											

Household Number:

Name of the item	Code	Did your household consume it in the last 7 days Yes...1 No....2	Total quantity consumed	Unit of measure? Kg..... 1 Grams 2 Liter..... 3 Number.... 4	If the unit of measure is number, then write the average weight in grams	Quantity consumed from purchased food				Quantity from own production	Quantity from other sources	
						Quantity consumed	Unit price	Total value	Did you purchase on credit? (note: if more than half bought on credit, write 'yes') Yes...1 No....2		Quantity	Source
				Code ↑				(Tk)				[Code1]
	O1_01	O1_02	O1_03	O1_04	O1_05	O1_06	O1_07	O1_08	O1_09	O1_10	O1_11	O1_12
Batashi	218											
Kachki	219											
Chanda	220											
Khalisa	221											
Chela	222											
Chapila	223											
Kajari	224											
Tatkeni	225											
Bata	226											
Ghutum	227											
Bele	228											
Chewa	229											
Poa	230											
Foli	231											
Bacha	232											
Baicha	233											
Kaikla	234											
Darkini	235											
Palshe	236											
Harkun	237											
Karfu fish	238											
Kakra	239											
Small prawn	240											
Dried small shrimp/prawn	241											
Dried small fish	242											
Fermented fish	243											
Other small fish	909											
Spices												
Dried chili	246											
Turmeric (not dried)	247											

Household Number:

Name of the item	Code	Did your household consume it in the last 7 days Yes...1 No....2	Total quantity consumed	Unit of measure? Kg..... 1 Grams 2 Liter..... 3 Number.... 4	If the unit of measure is number, then write the average weight in grams	Quantity consumed from purchased food				Quantity from own production	Quantity from other sources	
						Quantity consumed	Unit price	Total value	Did you purchase on credit? (note: if more than half bought on credit, write 'yes') Yes...1 No....2		Quantity	Source
				Code ↑				(Tk)				[Code1]
	O1_01	O1_02	O1_03	O1_04	O1_05	O1_06	O1_07	O1_08	O1_09	O1_10	O1_11	O1_12
Turmeric (dried)	248											
Jira	249											
Elachi	250											
Cinnamon	251											
Salt	252											
Panchforan	53											
Coriander	254											
Ginger	255											
Garam Masala	256											
Black cumin	257											
Mustard	258											
Til (sesame)	259											
Mouri	260											
Babuni/randhuni	261											
Tishi	262											
Tejpata	263											
Baking powder	264											
Other	910											
Other food												
Sugar	266											
Gur	267											
Misri/tal mistri	268											
Tea leaves	269											
Badam (ground nut)	270											
Honey	271											
Drinks and beverages												
Tea –prepared	272											
Coke/ Seven-up etc/Pepci/RC/Urocola etc	273											
Packaged Juice	274											

Household Number:

Name of the item	Code	Did your household consume it in the last 7 days Yes...1 No....2	Total quantity consumed	Unit of measure? Kg..... 1 Grams 2 Liter..... 3 Number.... 4	If the unit of measure is number, then write the average weight in grams	Quantity consumed from purchased food				Quantity from own production	Quantity from other sources	
						Quantity consumed	Unit price	Total value	Did you purchase on credit? (note: if more than half bought on credit, write 'yes') Yes...1 No....2		Quantity	Source
				Code ↑				(Tk)				[Code1]
	O1_01	O1_02	O1_03	O1_04	O1_05	O1_06	O1_07	O1_08	O1_09	O1_10	O1_11	O1_12
Horlicks/Bournvita/Tang	275											
Sugarcane/palm/date juice	276											
Other foods prepared outside home												
Rice/Jao	277											
Panta Bhaat	278											
Khichuri	279											
Polao/Biryani/Tehari	280											
Ruti/Parota	281											
Bonroti/paoroti	282											
Burger	283											
Paes/firni/cooked firni	284											
Pitha	285											
Halua	286											
Bharta	287											
Bhaji	288											
Jhol curry	289											
Bhuna curry	290											
Daal	291											
Salad	292											
Sweets	293											
Curd	294											
Alur chap	295											
Singara	296											
Puri	297											
Piaju	298											
Chhola/ghugni/boot	299											
Achar/Chatni	300											
Chotpoti	301											
Chanachur	302											

Household Number:

Name of the item	Code	Did your household consume it in the last 7 days Yes...1 No....2	Total quantity consumed	Unit of measure? Kg..... 1 Grams 2 Liter..... 3 Number.... 4	If the unit of measure is number, then write the average weight in grams	Quantity consumed from purchased food				Quantity from own production	Quantity from other sources	
						Quantity consumed	Unit price	Total value	Did you purchase on credit? (note: if more than half bought on credit, write 'yes') Yes...1 No....2		Quantity	Source
				Code ↑				(Tk)				[Code1]
	O1_01	O1_02	O1_03	O1_04	O1_05	O1_06	O1_07	O1_08	O1_09	O1_10	O1_11	O1_12
Biscuit	303											
Cake	304											
Patties	305											
Chips	306											
Chocolate	307											
Chewing gum	308											
Gaja	309											
Murali	310											
Nimki	311											
Any fried food	312											
Any boiled food	313											
Tobacco	314											

Sl no	Question	Response	Response Code
O1_13	Where did you buy most of the food items from?	<input type="text"/>	From farm/home..... 1 Village market (within own village)..... 2 Village market (outside own village)..... 3 City market..... 4 Others (please specify) 5

Code 1: Quantity from other sources

Loan from friend/relative 1
 Gift from friend/relative 2
 Wages 3
 Collected 4
 Government program 5
 NGO program 6
 Begged 7
 Hunted/Fished 8

Household Number:

Module O2: Household Food Inventory on the Day of Survey

(As observed and weighed by enumerator)

Item	Item Code	Quantity Kg..... 1 Gram..... 2 Liter..... 3	Amount
		Code ↑	
O2_01	O2_02	O2_03	O2_04
Paddy	1		
Rice	2		
Atta	3		
Cooking Oil	4		
Pulses	5		

Household Number: **Module P: Non-food Expenditure (Male Enumerator)****Module P1: Non-food Expenditure Monthly Recall**

Item Name	Item Code	Cash expenditure	Where do you buy most of the items from? From farm/home..... 1 Village market (within own village)..... 2 Village market (outside own village)..... 3 City market..... 4 Others (please specify) 5	If not purchased	
				Value	Friend/neighbors /relatives1 Own craftsmanship or stock2 Other3
		(Tk)		(Tk)	Code ↑
	P1_01	P1_02	P1_03	P1_04	P1_05
FUEL AND LIGHTING					
Firewood	1.				
Cow dung/cakes/bhushi/wood-powder	2.				
Jute stick	3.				
Kerosene	4.				
Agri by products fuel: paddy, hag, pressed sugarcane and dried com plants,etc.	5.				
Gas (natural, bio-gas)/LPG	6.				
Electricity	7.				
Pit coal, char coal, wood coal	8.				
Other fuels and light (e.g. matches and candles etc.)	9.				
COSMETICS AND OTHER EXPENSES					
Snow, cream, powder	10.				
Perfume etc.	11.				
Hair cutting, styling, shaving, etc.	12.				
Hair oil, hair cream, combs, clips, etc.	13.				
Razor, razor blades, shaving cream and lotions, etc.	14.				
Lipstick, nailpolish, etc.	15.				
Beautifying items (hair ribbon, churi, kajal, etc.)	16.				
WASHING AND CLEANING EXPENSES					
Bath soap, shampoo, toothpaste, etc.	17.				
Washing soap, powder for cloths	18.				
Washing/ laundry expenses	19.				
Bleaching powder, soda etc.	20.				
Vim/ dish cleaning supplies	21.				
Finis/ phenyl/ other household cleaning supplies	22.				
Toilet papers	23.				
Mosquito coil	24.				
Mosquito spray	25.				

Household Number:

Item Name	Item Code	Cash expenditure	Where do you buy most of the items from? From farm/home..... 1 Village market (within own village)..... 2 Village market (outside own village)..... 3 City market..... 4 Others (please specify) 5	If not purchased	
				Value	Friend/neighbors /relatives1 Own craftsmanship or stock2 Other3
		(Tk)		(Tk)	Code ↑
	P1_01	P1_02	P1_03	P1_04	P1_05
TRANSPORT/ TRAVEL AND OTHER MISC. CHARGES					
Bus fare	26.				
Rickshaw/ van fare	27.				
Taxi/ tempoo/ mishuk fare	28.				
Boat/ launch fare	29.				
Train fare	30.				
Other transport fare (specify)	31.				
Bicycle maintenance, tyres, tubes repairs etc.	32.				
Motor-cycle maintenance, repairs, etc.	33.				
Car maintenance, repairs, etc.	34.				
Boat maintenance, repairs, etc.	35.				
Petrol	36.				
Diesel	37.				
Motor oil/CNG. Etc	38.				
Other transport, repair and maintenance.	39.				
Telephone bill/ charges/mobile	40.				
Telegram, postal and courier service expenses, etc.	41.				
Salaries and wages of servants	42.				
Salaries and wages of drivers	43.				
Salaries and wages of others including guards, gardeners, housekeepers etc.	44.				
Other contingencies expenses (specify)	45.				

Household Number: **Module P2: Non-food Expenditure Annual Recall**

Item Name	Item Code	If purchased		If not purchased		
		How many did you buy?	Cash expenditure	How were these obtained? Friend/neighbors /relatives 1 Own craftsmanship or stock 2 Other 3	How many did you produce at home/receive as gift?	Value
		(Number)	(Tk)		(Number)	(Tk)
	P2_01	P2_02	P2_03	P2_04	P2_05	P2_06
For adult:						
Lungi/dhuti	51					
Shirts	52					
Pant	53					
Saree	54					
Blouse/ petticoat	55					
Salwar kameez/ Orna	56					
Punjabi/ Pajamas	57					
Suit, overcoat, ashkan, etc.	58					
Sweaters, Jacket, pullovers, mufflers, etc.	59					
Underwear etc.	60					
Socks, handkerchiefs, scarves, caps, neckties etc.	61					
Other (specify)	62					
For children:						
Lungi/dhuti	63					
Full pant	64					
Half pant	65					
Shirts	66					
T-shirt	67					
Frocks, dresses, babysuit etc.	68					
Socks, handkerchiefs, scarves, caps, neckties etc.	69					
Sweaters, Jacket, pullovers, mufflers, etc.	70					
Other for children (specify)	71					
Both						
Towel, Gamcha	72					
Chador, shawl, etc.	73					
Other (specify)	74					
CLOTHING MATERIAL AND TAILORING						
Clothing material and tailoring	75					
Mill-made cloth/ fabric	76					
Hand loom cloth/ fabric	77					
Drill and other cloth for trousers	78					
Woolen cloth	79					
Silk	80					

Household Number:

Item Name	Item Code	If purchased		If not purchased		
		How many did you buy?	Cash expenditure	How were these obtained? Friend/neighbors /relatives 1 Own craftsmanship or stock 2 Other 3	How many did you produce at home/receive as gift?	Value
		(Number)	(Tk)		(Number)	(Tk)
	P2_01	P2_02	P2_03	P2_04	P2_05	P2_06
Artificial silk etc.	81					
Other artificial-yarn made cloths	82					
Tailoring expenses	83					
Other clothing related expenses	84					
FOOTWEAR						
Leather shoes	85					
Leather sandal-shoes	86					
Leather sandal	87					
Plastic shoes	88					
Plastic sandal-shoes	89					
Other sandal	90					
Canvas shoes, sports shoes, etc.	91					
Wooden sandals	92					
Shoe brush, polish, cleaning supplies, etc.	93					
Maintenance and repair expenses of foot wear	94					
Other expenses regarding footwear	95					
HOUSEHOLD-USE TEXTILES, ETC.						
Quilt/blanket/Katha	96					
Toshok	97					
Jajim	98					
Foam sheet	99					
Bedsheets	100					
Bed cover	101					
Pillows, cushions	102					
Pillow cover, cushion cover	103					
Table cover	104					
Curtain	105					
Mosquito netting	106					
Other (specify)	107					
HOUSING RELATED EXPENSES						
House rent (rented house)	108					
Imputed rent (owner-occupied or other)	109					
Water/ sewerage charges	110					
Home additions/ improvements	111					
Painting	112					
Disaster-related maintenance/ repair	113					
Other routine maintenance/ repair	114					

Household Number:

Item Name	Item Code	If purchased		If not purchased		
		How many did you buy?	Cash expenditure	How were these obtained? Friend/neighbors /relatives..... 1 Own craftsmanship or stock..... 2 Other..... 3	How many did you produce at home/receive as gift?	Value
		(Number)	(Tk)		(Number)	(Tk)
	P2_01	P2_02	P2_03	P2_04	P2_05	P2_06
Municipal tax	115					
Other related services/ expenses	116					
MEDICAL TREATMENT EXPENSES (MALE)						
Doctor's fees	117					
Other practitioner's fees (homeopath etc.)	118					
Medicines	119					
Ayurvedic/ Kabiraji	120					
Medical Tests (X-ray, blood, urine etc.)	121					
Hospitalization, clinic charges, etc.	122					
Dental related expenses	123					
Spectacles	124					
Hearing aids	125					
Crutches	126					
Health-related travel/ incidental expenses	127					
MEDICAL TREATMENT EXPENSES (FEMALE)						
Doctor's fees	128					
Other practitioner's fees (homeopath etc.)	129					
Medicines	130					
Ayurvedic/ Kabiraji	131					
Medical Tests (X-ray, blood, urine etc.)	132					
Hospitalization, clinic charges, etc.	133					
Dental related expenses	134					
Spectacles	135					
Hearing aids	136					
Crutches	137					
Maternity expenses	138					
Health-related travel/ incidental expenses	139					
EDUCATIONAL EXPENSES (MALE)						
Registration fees	140					
Examination fees	141					
Annual fees	142					
School fees	143					
Personal Teaching expenses	144					
Text book/ note books/ stationary	145					
Hostel Expenses	146					

Household Number:

Item Name	Item Code	If purchased		If not purchased		
		How many did you buy?	Cash expenditure	How were these obtained? Friend/neighbors /relatives..... 1 Own craftsmanship or stock..... 2 Other..... 3	How many did you produce at home/receive as gift?	Value
		(Number)	(Tk)		(Number)	(Tk)
	P2_01	P2_02	P2_03	P2_04	P2_05	P2_06
Other	147					
EDUCATIONAL EXPENSES (FEMALE)						
Registration fees	148					
Examination fees	149					
Annual fees	150					
School fees	151					
Personal Teaching expenses	152					
Text book/ note books/ stationary	153					
Hostel Expenses	154					
Other	155					
REMITTANCES, CEREMONIES, GIFTS, ETC.						
Remittances to others living separately	156					
Zakat	157					
Fitra	158					
Donation/ Sadqa	159					
Qurbani	160					
Religious functions (milad etc.)	161					
Expenditure on Hajj	162					
Expenditure on Pilgrimage	163					
Expenditure on marriage	164					
Expenditure on births	165					
Expenditure on deaths	166					
Other (specific)	167					
RECREATION & LEISURE, ETC.						
Books, newspaper, magazines, story books	168					
Cinema	169					
Theater	170					
Variety shows, concerts, etc.	171					
Sporting expenses, club membership fees, etc.	172					
Video cassette purchases and rental etc.	173					
Audio cassette purchases etc.	174					
Photography	175					
TV/ video/ satellite license fees, etc.	176					
Other recreation, marriage day/birthday, tourism & leisure related expenses	177					
TAXES, INTEREST, FINES, ETC.						

Household Number:

Item Name	Item Code	If purchased		If not purchased		
		How many did you buy?	Cash expenditure	How were these obtained? Friend/neighbors /relatives 1 Own craftsmanship or stock 2 Other 3	How many did you produce at home/receive as gift?	Value
		(Number)	(Tk)		(Number)	(Tk)
	P2_01	P2_02	P2_03	P2_04	P2_05	P2_06
Income tax	178					
Bank interest charge, Payment of banking charge	179					
Fines	180					
Legal practitioner fees	181					
Other legal expenses	182					
Property registration fees	183					
Other (specify)	184					
COOKING EQUIPMENT						
Glass/china/clay plates and dishes etc.	185					
Refrigerators	186					
Stove (electric/ gas/ kerosene)	187					
Pots/ pans	188					
Other kitchen ware and utensils	189					
spoons/ forks/ knives etc.	190					
Micro oven/Pressure cooker	191					
Others	192					
FURNITURE						
Bed/Chowki	193					
Table/Chair/Dressing Table	194					
Sofa	195					
Wood/Iron Almirah/Wardrobe/Bookshelf	196					
Trunk/Suitcase	197					
Costs of Furniture Building/Repair/Polish	198					
Other furniture related cost	199					
PERSONAL ARTICLES						
Gold Jewelry	200					
Silver Jewelry	201					
Imitation Jewelry	202					
Purses/ money bags	203					
Vanity bags	204					
Umbrella, walking stick	205					
Tie-pin, cigarette cases, lighter etc.	206					
Wrist watch/ clock etc.	207					
Other personal use items (belts, etc>)	208					
MISC. HOUSEHOLD DURABLE	209					
Radio	210					
Two-in-one	211					

Household Number:

Item Name	Item Code	If purchased		If not purchased		
		How many did you buy?	Cash expenditure	How were these obtained? Friend/neighbors /relatives 1 Own craftsmanship or stock 2 Other 3	How many did you produce at home/receive as gift?	Value
		(Number)	(Tk)		(Number)	(Tk)
	P2_01	P2_02	P2_03	P2_04	P2_05	P2_06
Black & White Television	212					
Colored Television	213					
VDO game set	214					
VCD/ VCR/dish antenna/cable membership fees	215					
Washing machine, iron, etc.	216					
Guitar/ orchestra/ harmonium	217					
Typewriter, personal computer etc.	218					
Lenten/ chimney lamp etc.	219					
Electric fans, air-conditioners, coolers, etc.	220					
Cameras/ camcorders/video camera	221					
INSURANCE EXPENDITURE	222					
Life insurance	223					
Health insurance	224					
General insurance	225					

Household Number: **Module Q: Housing (Male Enumerator)***Ask of household head or other senior member of household*

Question number	Question	Response	Response option
Q01.	Do you own this house, do you use it for free, or do you rent this house?	<input type="text"/>	Owned..... 1 Free 2 Rented 3 (Go to Q03)
Q02.	Estimate the <u>monthly</u> rent you could receive if you rented this dwelling or one exactly like it to another person?	<input type="text"/>	Taka (Go to J04) (if don't know.....9999)
Q03.	How much <u>monthly</u> rent do you pay for this dwelling?	<input type="text"/>	Taka
Q04.	How many years ago was this house built? How old is it?	<input type="text"/>	Years (if don't know.....9999)
Q05.	If this household shares space with another household, how many households live in this house?		Number (write 0 if no sharing)
Q06.	<u>OBSERVE</u> What type of dwelling does the household live in?	<input type="text"/>	No sign of damage 1 Slightly damaged..... 2 Somewhat damaged 3 Very damaged 4 In a very poor state 5
Q07.	<u>OBSERVE</u> <u>The outer walls</u> of the main dwelling of the household are predominantly made of what material?	<input type="text"/>	Concrete/Brick 1 Tin/CI Sheet 2 Wood..... 3 Mud..... 4 Bamboo..... 5 Jute straw 6 Plastic /Polythene 7 Cardboard/paper 8 Golpaata/Palm leaf 9 Grass/Straw 10 Other (specify) 11
Q08.	<u>OBSERVE</u> The <u>roof</u> of the main dwelling is predominantly made of what material?	<input type="text"/>	Concrete/Brick 1 Tin/CI Sheet 2 Wood..... 3 Mud..... 4 Bamboo..... 5 Jute straw 6 Plastic /Polythene 7 Cardboard/paper 8 Golpaata/Palm leaf 9 Grass/Straw 10 Other (specify) 11

Household Number:

Question number	Question	Response	Response option
Q09.	<u>OBSERVE</u> The <u>floor</u> of the main dwelling is predominantly made of what material?	<input type="text"/>	Concrete/Brick 1 Tin/CI Sheet 2 Wood..... 3 Mud..... 4 Bamboo..... 5 Jute straw 6 Plastic /Polythene..... 7 Cardboard/paper 8 Golpaata/Palm leaf 9 Grass/Straw 10 Other (specify) 11
Q10	How many rooms does your household occupy?	<input type="text"/>	Number (Exclude rooms used for business)
Q11	How many rooms are used for sleeping?	<input type="text"/>	Number
Q12	<u>OBSERVE</u> What is the total floor area of the dwelling in square feet? (measuring tape to be provided)	<input type="text"/>	Square feet
Q13	Does this household have an electricity connection?	<input type="text"/>	Yes 1 No 2>>Q16
Q14	How often does the electricity supply go off?	<input type="text"/>	Never..... 1 Rarely..... 2 Less than half the time 3 About half the time..... 4 More than half 5 Almost always 6
Q15	How much was the electricity cost last month?		Taka
Q16.	What is your main source of <u>cooking fuel</u> ?	<input type="text"/>	Electricity 1>>Q18 Supply gas 2 LPG..... 3 Kerosene 4 Firewood 5 Dried cow dung..... 6 Coal..... 7 Rice bran/saw dust 8 Dried leaves 9 Other (specify) 10
Q17	What was the total cost for cooking fuel in the household in the past month?	<input type="text"/>	Taka

Household Number:

Question number	Question	Response	Response option
Q18.	What is your main source of <u>lighting fuel</u> ?	<input type="text"/>	Electricity1>>Q20 Private Generator2 Solar electricity3 Kerosene4 Candles.....5 Torch/fire skewer6 Others (specify).....7
Q19	What was the total cost for lighting fuel in the household in the past month?	<input type="text"/>	Taka
Q20	How many household members own a cellular telephone in working condition?	<input type="text"/>	number
Q21	What was the total cost for cell phone service for all household members last month?	<input type="text"/>	Taka

Household Number: **Module R: Sanitation and Water (Male Enumerator)**

Question number	Question	Response	Response Code
R01	What type of latrine do you use?	<input type="text"/>	None (open field) 1 Kutcha (fixed place) 2 Pucca (unsealed)..... 3 Sanitary without flash (water sealed)..... 4 Sanitary with flash (water sealed)..... 5 Community latrine..... 6 Other (specify)..... 7
R02	Does the household have access to a water supply?	<input type="text"/>	Yes 1 No..... 2
R03	What is the source of water used for other purposes than drinking?	<input type="text"/>	Supply Water (pipd) inside house..... 1 Supply Water (pipd), outside 2 Own tube well 3 Community tubewell 4 Rain water 5 Ring Well/ Indara 6 Pond/River/ Canal 7 Bottled water 8 Shallow tubewell for irrigation 9 Deep tubewell for irrigation 10 Other (specify)..... 11
R04	Is the source of drinking water same as the source of water used for other purposes?	<input type="text"/>	Yes 1>>R06 No..... 2
R05	Source of drinking water	<input type="text"/>	Supply Water (pipd) inside house..... 1 Supply Water (pipd), outside 2 Own tube well 3 Community tubewell 4 Rain water 5 Ring Well/ Indara 6 Pond/River/ Canal 7 Bottled water 8 Shallow tubewell for irrigation 9 Deep tubewell for irrigation 10 Other (specify)..... 11
R06	Drinking water purifying process	<input type="text"/>	Filtered 1 Boiled 2 Boiled and filtered 3 Chemically treated(iodine/chlorine) 4 Straight from source 5 UV treated 6 Others (specify)..... 7
R07	If tubewell is used for drinking water, has the water been tested for arsenic contamination?	<input type="text"/>	Yes 1 No..... 2>>R10 Don't know..... 3>> R10

Household Number:

Question number	Question	Response	Response Code
R08	What color has the tubewell been marked?	<input type="text"/>	Red 1 Green..... 2>> R10 None..... 3>> R10 Don't know..... 4>> R10
R09	Do you still use the hand pump for drinking water?	<input type="text"/>	Yes 1 No..... 2
R10	How do you dispose garbage?	<input type="text"/>	Local authority collects 1 Private firm collects..... 2 Public garbage pit/hole 3 Own garbage pit/hole 4 Burnt/buried 5 Own garbage heap (not pit) 6 Gather in open place..... 7 Throw in pond/khaal/beel..... 8 Other (specify)..... 9

Household Number: **Module S: Access to Facilities (Male Enumerator)**

Code	List of Facilities	Does any household member visit this facility regularly? Yes 1 No 2>>next row	What mode of transportation do you normally use to get to the closest facilities? (multiple responses possible- list 3) Foot..... 1 Bicycle..... 2 Rickshaw/Van..... 3 Bullock cart..... 4 Boat 5 Engine boat 6 Motorcycle..... 7 Tempo/Baby taxi/Nosimon 8 Bus..... 9 Train 10 Other 11			Distance	How long does it normally take to get from your house to the closest facility?	
							Hour(s)	Minutes
Code	S01	S02	S03_a	S03_b	S03_c	S04	S05	S06
01	Health center/hospital							
02	Bus stop							
03	Main road							
04	Railway station							
05	Local shop/shops							
06	Weekly/periodic bazaar							
07	Nearest town							
08	College							
09	Agricultural office							
10	Post office							
11	Bank							
12	BRAC							
13	Grameen Bank							
14	ASA							

Household Number: **Module T: Economic Events/Shocks (Male Enumerator)****Module T1: Negative Shocks**Recall period: Last 5 years. Households sometimes have good and bad surprises. First ask about any **bad surprises** or things that hurt the household financially.

Shock Code	Shocks (unexpected events)	How many times did occur in this household last 5 years? (Number of occurrences)	The last time it happened							Please rank the worst three shocks, with 1 for the worst shock. Most worst shock1 2 nd most worst shock.....2 3 rd most worst shock3	
			When did it happen?		What is your current condition after the shock? Worse than before 1 Same as before 2 Better than before 3	What was the value of the total loss?	What did you do to cope with its effect? Write up to 3 ways of coping with the shock	How long the impact of the event last? Write 999 if ongoing			
			Month	Year							
					Code ↑	(Tk)	Code 1			(Days)	
T1_01	T1_02	T1_03	T1_04	T1_05	T1_06	T1_07	T1_08a	T1_08b	T1_08c	T1-09	T1_10
01	Death of main earner										
02	Death of other than main earner in the family										
03	Loss of income due to illness or injury of household member										
04	Medical expenses due to illness or injury										
05	Loss of a regular job of a household member										
06	Lost home due to river erosion										
07	Eviction from previous residence for any other reason										
08	Divorce or abandonment										
09	Major loss of crops due to flood										
10	Major loss of crops due to other reasons (drought, storms, pests, disease, etc.)										
11	Loss of livestock due to flood										
12	Loss of livestock due to death										
13	Loss of livestock due to theft										
14	Loss of productive assets due to floods										
15	Loss of productive assets due to other reasons (theft, fire, river erosion, storms, etc.)										
16	Loss or destruction of other consumption assets (personal) due to floods										

Household Number:

Shock Code	Shocks (unexpected events)	How many times did occur in this household last 5 years? (Number of occurrences)	The last time it happened							Please rank the worst three shocks, with 1 for the worst shock. Most worst shock1 2 nd most worst shock.....2 3 rd most worst shock.....3	
			When did it happen?		What is your current condition after the shock? Worse than before 1 Same as before 2 Better than before 3	What was the value of the total loss?	What did you do to cope with its effect? Write up to 3 ways of coping with the shock	How long the impact of the event last? Write 999 if ongoing			
			Month	Year							
					Code ↑	(Tk)	Code 1			(Days)	
T1_01	T1_02	T1_03	T1_04	T1_05	T1_06	T1_07	T1_08a	T1_08b	T1_08c	T1-09	T1_10
17	Loss of consumption assets (personal) due to factors other than floods										
18	Dowry payment										
19	Other costs of wedding										
20	Division of father's property										
21	Failure or bankruptcy of business										
22	Extortion by mastans										
23	Family member put in prison										
24	Household member arrested by police										
25	Paid a big bribe										
26	Cost of court case										
27	Losses due to court case										
28	Reparations for victim of crime committed by household member										
29	Long duration hartals/strikes/political unrest										
30	Cut-off or decrease of regular remittances to household										
31	Withdrawal of NGO assistance										
32	Increase in food prices										
33	Increase in prices of inputs										
34	Other -1 (specify)										
35	Other -2(specify)										

Household Number:

Code list for Module T1:

Code 1: Coping strategies

None	1	Ate less food to reduce expenses	10	Emergency receipt of remittance	
Sold land (specify homestead or agricultural)	2	Ate lower quality food to reduce expenses	11	from migrant family member	20
Mortgaged/leased land (specify		Took children out of school	12	Forced to change occupation	21
homestead or agricultural).....	3	Transferred children to less expensive school	13	Moved to less expensive housing	22
Sold productive asset (specify)	4	Adult household member took job elsewhere		Sent non-working household member to work	23
Mortgaged productive asset (specify)	5	temporarily	14	Took help from others	24
Sold consumption asset (specify).....	6	Sent household member away permanently.....	15	Other (specify)	25
Mortgaged consumption asset (specify).....	7	Sent children to be fostered by relatives	16		
Took loan from NGO/institution.....	8	Sent children into domestic service	17		
Took loan from mahajan/non-institutional		Sent children to work somewhere other than			
source.....	9	domestic service	18		
		Sent wife and children to her parental home.....	19		

Household Number: **Module T2: Positive Economic Events**

Recall period: Last 5 years. Now ask about any positive events that benefited the household financially.

Events	Event Code	Did the household experience any positive events last 5 years? Yes.....1 No2 → NEXT EVENT	The last time it happened, what year did it happen?		The last time it happened, what was the total value of items received?	Rank the most important positive events Most important.....1 2 nd most important .2 3 rd most important..3
			Month	Year		
					(Tk)	
T2_01	T2_02	T2_03	T2_04	T2_05	T2_06	T2_07
New regular job for household member	01					
New or increased remittances	02					
Inheritance	03					
Large gift/lottery winnings	04					
Receipt of dowry	05					
Gain from business activities, specify	06					
Scholarship for child's education	07					
New NGO IGA starts	08					
Primary Education Stipend (100 taka)	09					
Secondary school stipend	10					
Other 1 (specify)	11					
Other 2 (specify)	12					
Other 3 (specify)	13					

Household Number: **Module U: Participation in Social Safety Net Programs (Male Enumerator)**

Collect data for last one year. Applicable for all household members. In case of participation in multiple programs report MID of all participants.

Sl. No	Description	Has s/he got any assistance? Yes 1 No..... 2	Member ID		Cash	Rice		Wheat		Other food	Other in-kind
		Code ↑			Tk	Kg	Value (Tk/kg)	Kg	Value (Tk/kg)	Value (Tk)	Value (Tk)
SLNO		U01	MID1	MID2	U02	U03	U04	U05	U06	U07	U08
01	Ananda School										
02	Stipend for Primary Students										
03	School Feeding Program										
04	Stipend for Dropout Students										
05	Stipend for Secondary and Higher Secondary/Female Student										
06	Stipend for Poor Boys in secondary school										
07	Stipend for Disabled Students										
08	Old Age Allowance										
09	Allowances for Distressed Cultural Personalities/ Activitists										
10	Allowances for beneficiaries in Ctg. Hill Tract area.										
11	Allowances for the Widowed, Deserted and Destitute Women										
12	Allowances for the Financially Insolvent Disabled										
13	Maternity allowance program for the Poor Lactating Mothers										
14	Maternal Health Voucher Scheme										
15	Honorarium for Insolvent Freedom Fighters										
16	Honorarium for Injured Freedom Fighters										
17	Gratuitous Relief (Cash)										
18	Gratuitous Relief (GR)- Food										
19	General Relief Activities										
20	Cash For Work										
21	Agriculture Rehabilitation										
22	Subsidy for Open Market Sales										
23	Vulnerable Group Development (VGD)										
24	VGD-UP (8 District on Monga Area)										
25	Vulnerable Group Feeding (VGF)										
26	Test Relief (TR) Food										
27	Food Assistance in CTG-Hill tracts Area										

Household Number:

Sl. No	Description	Has s/he got any assistance? Yes 1 No..... 2	Member ID	Cash	Rice	Wheat	Other food	Other in-kind
28	Food For Work (FFW)							
29	Special fund for Employment Generation for Hard-core Poor in SIDR Area							
30	Fund for the Welfare of Acid Burnt and Disables							
31	100 days Employment Scheme							
32	Rural Employment Opportunities for Protection of Public Property (REOPA)							
33	Rural Employment and Rural Maintenance Program							
34	Community Nutrition Program							
35	Char Livelihood							
36	Shouhardo Program							
37	Accommodation (Poverty Alleviation & Rehabilitation) Project (Chief Advisors Office)							
38	Housing Support							
39	TUP (BRAC)							
40	One House one farm							
41	Improving maternal and child nutrition (IMCN)							
42	Enhancing resilience to disasters and the effects of climate change (ER)							
43	Other (specify)							

Household Number: **Module V: Migration, Remittances, Transfers and Other Income (Male Enumerator)****Module V1: Profile of Current Migrants (Domestic and International)**

V1_01	Has anyone, who was a members of your household in the past five years, currently a migrant(living away for 6 months or more) within the country (but not in same upazilla) or abroad?		Yes 1 No 2>>V2_01
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Report for all current migrants of the household. Use separate rows for each person .

Person ID	Name	Relation to household head	When did (name) migrate?		Age	Sex Male...1 Female.2	Education	Occupation Use Code 3 from Module C	Which country is s/he in now? Within Bangladesh...1 Abroad.....2>>V1_11	If in-country, write zila code.	If abroad, write country code.	For what purpose did the member initially migrate?	How was the migration expenses paid?	Does the migrant sent remittance home on a regularly (at least one in the last 12 months)? Yes...1 No....2
		Code 1	year	month	Complete year	Code ↑	Code 2	Code 3 from Module C	Code ↑	Code 4	Code 5	Code 6	Code 7	Code ↑
PID	Name	V1_02	V1_03	V1_04	V1_05	V1_06	V1_07	V1_08	V1_09	V1_10	V1_11	V1_12	V1_13	V1_14
81														
82														
83														
84														
85														
86														

Household Number:

Code 1: Relationship	Code 2: Education	Code 4: District /Zilla		
Relationship with primary respondent Primary respondent 1 Primary respondent Husband/wife 2 Son/daughter 3 Daughter/son -in-law 4 Grandson/daughter 5 Father/mother 6 Brother/sister 7 Niece/Nephew 8 Primary respondent's cousin 9 Relationship with primary respondent's husband/wife Father-in-law/mother-in-law 10 Brother/Sister-in-law 11 Husband/wife's niece/nephew 12 Primary respondent's husband/wife's cousin 13 Other relative/non relative Other relative 14 Household help 15 Other Non relative/friends 14	Never attended school 99 Reads in class I 0 Completed class I 1 Completed class II 2 Completed class III 3 Completed class IV 4 Completed class V 5 Completed class VI 6 Completed class VII 7 Completed class VIII 8 Completed class IX 9 Completed Secondary School/Dakhil. 10 Completed Higher Secondary/Alim ... 12 BA/BSC pass/Fazil 14 BA/BSC honors/Fazil 15 MA/MSC and above/Kamil 16 SSC Candidate 22 HSC Candidate 33 Preschool class (general) 66 Preschool (mosque based) 67 Medical/MBBS 71 Nursing 72 Engineer 73 Diploma Engineer 74 Vocational/Technical Education 75 Other (specify) 76	Dhaka 1 Gazipur 2 Manikganj 3 Munshiganj 4 Narayanganj 5 Narsingdi 6 Faridpur 7 Gopalganj 8 Madaripur 9 Rajbari 10 Shariatpur 11 Jamalpur 12 Sherpur 13 Kishoreganj 14 Mymensing 15 Netrokona 16 Tangail 17 Chittagong 18 Cox's bazar 19 Bandarban 20 Khagrachhari 21 Rangamati 22 Brahmanbaria 23 Chandpur 24	Comilla 25 Feni 26 Lakshimpur 27 Noakhali 28 Khulna 29 Jessore 30 Jhenaidah 31 Magura 32 Narail 33 Bagerhat 34 Satkhira 35 Chuadanga 36 Kushtia 37 Meherpur 38 Rajshahi 39 Noagaon 40 Nawabganj 41 Natore 42 Pabna 43 Sirajganj 44 Bogra 45 Joypurhat 46 Gaibanda 47 Kurigram 48	Lalmonirhat 49 Nilphamari 50 Rangpur 51 Dinajpur 52 Thakurgaon 53 Panchagarh 54 Sylhet 55 Hobiganj 56 Moulvibazar 57 Sunamganj 58 Barishal 59 Bhola 60 Jhalakathi 61 Pirojpur 62 Barguna 63 Patuakhali 64

Code 5: Country			Code 6: Primary reason for migration	Code 7: How was the migration expenses paid
Australia 1 Bahrain 2 Brunei 3 Canada 4 Cyprus 5 Federation of Russia . 6 France 7 Germany 8 Greece 9 India 10 Iran 11 Iraq 12 Italy 13 Japan 14	Jordan 15 Kuwait 16 Laos 17 Liberia 18 Libya 19 Malaysia 20 Maldives 21 Mauritius 22 New Zealand 23 Oman 24 Pakistan 25 Poland 26 Qatar 27 South Korea 28	Saudi Arabia 29 Singapore 30 South Africa 31 Spain 32 Sweden 33 Switzerland 34 Taiwan 35 Turkey 36 U.S.A 37 UAE 38 U.K. 39 Yemen 40 Other(specify) 41	Employment 1 Education 2 Marriage 3 Health care 4 Medical Treatment 5 Escape war/ violence 6 Other (specify) 7	Migrating member paid all expenses 1 All expenses were paid from common household resources 2 Received money from friends/relatives 3 Borrowed money from friends and relatives 4 Borrowed money from commercial lender 5 Made arrangement with employment agency/foreign employer 6 Mortgaged land 7 Sold own land or other assets 8 I do not know 9 Others (Specify) 10

Household Number: **Module V2: Remittance in**

V2_01	During the past 12 months, have you or any member of household received any money from any person who does not live in your household?	<input type="text"/>	Yes 1>>V2_02 No 2>>V3_01
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Note: Report for remittances received from migrants of the household and any other remitter.**Use PID 81-89 for migrants who were household members in the last 5 years. Use PID 91-99 for remitters who were never household members.**

Person ID	What is the relationship of the remitter to the household head?	Where does the remitter currently live?		In the past 12 months			Which expenditure, saving, and investment activity would have been CUT had the remittance from this source not been received?	Did the person who sent the money put any condition on items the money was to be spent on? Yes...1 No...2	What items were these?
		District (if within Bangladesh)	Country (if outside Bangladesh)	How many times have you received remittance payments?	How much money in total did your household receive?	How was the remittance sent? (Report primary method)			
	Code 1	Code 4	Code 5	number	Taka	Code 8	Code 9	Code	Code 9
PID	V2_02	V2_03	V2_04	V2_05	V2_06	V2_07	V2_08	V2_09	V2_10

Code 8: How was the remittance sent	Code 9: Applicable for V2_08 & V2_10
Personal delivery by family, friends.....1	Cash savings..... 1
Remittance company (i.e. Western Union) ..2	Education 2
Transfer to your own bank account.....3	Health (Hospital/Doctor/Medicine)..... 3
Transfer to someone else's bank account.....4	Consumption (food, cloths)..... 4
Cheque / Bank draft5	Build house/land /renovated house 5
Money order.....6	Purchase of vehicle..... 6
TT (telephonic/telegraphic transfer).....7	Purchase consumer durables..... 7
Hundi/Hawala8	Investment in agr. or business 8
Other (Specify)9	Purchase of gold and other jewelry 9
	Livestock purchase..... 10
	Purchase shares/stock/bonds 11
	Other (Specify)..... 12

Household Number:

Module V3: Remittance out

Report for remittances received from migrants of the household and any other remitter

V3_01	During the past 12 months, did you or any member of your household send money to someone who does not live in your household?	<input type="text"/>	Yes..... 1>>V3_02 No 2>>End Module
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SI No.	What is the relationship of the recipient to the household head?	Where does the recipient currently live?		In the past 12 months		
		District (if within Bangladesh)	Country (if outside Bangladesh)	How many times have you send remittance payments?	How much money in total did your household send?	How was the remittance sent? (Report primary method)
	Code 1	Code 3	edoC 4			Code 8
SI No.	V3_02	V3_03	V3_04	V3_05	V3_06	V3_07

Household Number:

Module V4: Other Income household

Report for the last 12 months:

Question number	Question	Response	Response code
V4_01	Income received from land rent	<input type="text"/>	Taka/year
V4_02	Income received from rent of other property	<input type="text"/>	Taka/year
V4_03	Income received from life and non-life insurance	<input type="text"/>	Taka/year
V4_04	Profits and dividends received as partner/share holder	<input type="text"/>	Taka/year
V4_05	Gratuity, separation payment, retirement benefit received	<input type="text"/>	Taka/year
V4_06	Lottery, prizes, and similar income received (in cash)	<input type="text"/>	Taka/year
V4_07	Lottery, prizes, and similar income received (in kind)	<input type="text"/>	Report imputed value
V4_08	Charity and other assistance (in cash)	<input type="text"/>	Taka/year
V4_09	Charity and other assistance (in kind)	<input type="text"/>	Report imputed value
V4_10	Interests received (from bank and other sources)	<input type="text"/>	Taka/year
V4_11	Other cash receipts(not included elsewhere)	<input type="text"/>	Taka/year
V4_12	Other in kind receipts (not included elsewhere)	<input type="text"/>	Report imputed value

Household Number:

Module W: Anthropometry, Health and Illness (Female Enumerator)

Module W1: Anthropometry

Note: Measure all household members.

[illegible]

Household Number:

Module W2: Anthropometry-Children

Note: Measure all children ≤ 60 months old. If the mother of the child is not a household member (for example, mother is deceased or is part of another household) put 55

Member ID	Name	Mother's ID No.	Child's date of birth					Height	Weight	How was this child's height measured? Lying down...1 Standing up...2	Reason for not being measured? Have measured 1 Absent 2 Sick 3 Refused to give measurement 4 Other (specify) 5	Is this child still breast fed? Yes.....1 No.....2
			Day	If does not know date, what week of the month?	Month	Year	Confirmed with birth certificate or health card? Yes 1 No 2					
							Code ↑	(cm)	(kg)	Code ↑	Code ↑	Code ↑
MID	Name	W2_01	W2_02	W2_03	W2_04	W2_05	W2_06	W2_07	W2_08	W2_09	W2_10	W2_11

Household Number: **Module W3: Health**

Health status questions to be asked about all household members over the age of fifteen.

Member ID	Name	Can this person:			Does this person have difficulties with:			Does this person have a missing or deformed limb?	Does this person suffer from any paralysis or have part of their body that has lost its sense of touch?
		Stand up after sitting down	Walk for 5km	Carry 20 litres of water for 20m	Hearing?	Speaking?	Eyesight?	If yes, which one?	If yes, which one?
		Code 1	Code 1	Code 1	Code 2	Code 3	Code 4	Code 5	Code 5
MID	Name	W3_01	W3_02	W3_03	W3_04	W3_05	W3_06	W3_07	W3_08

Code 1: Daily activity Easily 1 With a little difficulty..... 2 With a lot of difficulty 3 Not at all 4 Code 2: Hearing No problems..... 1 Sometimes has difficulty..... 2 Generally poor hearing..... 3 Deaf in one ear..... 4 Deaf in both ears 5	Code 3: Speech No problems 1 Sometimes has difficulty 2 Generally has difficulty 3 Cannot speak at all 4	Code 4: Sight No problems 1 Difficulties seeing things close 2 Difficulty in seeing things far away 3 Generally poor eyesight 4 Cannot see at night/sees with difficulty 5 Blind in one eye 6 Blind in both eyes 7	Code 5: Which one No / none 1 Finger 2 Hand 3 Arm 4 Toes 5 Foot 6 Leg 7 Jaw 8	Back..... 9 From hips down 10 From neck down 11 Left side of body 12 Right side of body..... 13 Part of/ whole face 14 Whole body..... 15 Other: Specify..... 16
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Household Number:

Module W4: Illness

Questions to be asked to all household members.

Member ID	Name	In the last four weeks, has this person suffered: (Write 77 if condition has persisted for more than four weeks)													
		Any illness or injury in the last four weeks? Yes1 No.....2 >> next row	How many days in total?	How many days has this person been unable to perform his/her main activity at all? (applicable only for 15 years and above. If not applicable write 99)	Significant weight loss Yes1 No.....2	Prolonged fever? Yes..... 1 No..... 2 >>W4_07	How many days in total?	Diarrhoea Yes..... 1 No 2 >>W4_09	How many days in total?	Persistent cough? Yes1 No.....2 >> W4_09	How many days in total?	Generalized skin rash? Yes..... 1 No..... 2 >> W4_13	How many days in total?	Mouth or throat infection? Yes..... 1 No 2>> next row	How many days in total?
		Code ↑	Days	Days	Code ↑	Code ↑	Days	Code ↑	Days	Code ↑	Days	Code ↑	Days	Code ↑	Days
MID	Name	W4_01	W4_02	W4_03	W4_04	W4_05	W4_06	W4_07	W4_08	W4_09	W4_10	W4_11	W4_12	W4_13	W4_14

Household Number: **Module X: Household Food Consumption and Food Security (Female Enumerator)****Module X1: Household Food Consumption**

Recall: Last 24 Hours

Note:

First ask if yesterday was a special day, like a celebration or feast day or a fast day where anyone in the HH ate special foods or where they ate more or less than usual or did not eat because they were fasting?

X1_01. Was yesterday a special day when special kinds of foods were eaten?

☐ Yes 1
☐ No.....2

If yesterday was **not** a special day, then ask the respondent about the types of foods that they or anyone else in their household ate yesterday during the day and at night.

If yesterday **was** a special day, then ask the respondent to describe the foods (meals and snacks) consumed the **day before yesterday (or the last normal day)** during the day and night, whether at home or outside the home.

(Gather information on last 24 hours family food consumption)

Quantity of family food consumption: Female member in-charge of cooking, supervising and serving to be interviewed.

Recall Date:

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

Respondent ID:

Source of Food: Left over from previous day..... 1 Food cooked in the HH..... 2 Purchased..... 3 Food received from others 4 Invitation..... 5 Food taken at employers place..... 6	Time of day Morning..... 1 Noon..... 2 Night 3 Snacks 4	Menu	Menu codes	Ingredients	Ingredients	Total raw weight of ingredients	Cooked weight
			Code		Code	(gram)	(gram)
X1_02	X1_03	X1_04	X1_05	X1_06	X1_07	X1_08	X1_09

Household Number:

Module X2: Intra-Household Food Distribution

Household Recall (Individual Level):

(Gather information on last 24 hours family food consumption)

Quantity of family food consumption: Female member in-charge of cooking, supervising and serving to be interviewed. If anyone has not taken any meal then put reason code in column X2_03

Mark tick for appropriate time

Morning	Noon	Night	Snacks

Member ID Or Guest/Given food to other/Left over for next day	Name	Meal taken or not?	If Guest			Menu	Menu codes	Cooked Weight	If curry, then weight of meat/fish in the curry	Where meal was taken	Order of taking meal
			Sex Male..... 1 Female...2	Age	Type of Guest						
Note*		Code 1 ↓	Code↑	(Years)	Code 2		Code	(Gram)	(Gram)	Code 3 ↓	
X2_01	X2_02	X2_03	X2_04	X2_05	X2_06	X2_07	X2_08	X2_09	X2_10	X2_11	X2_12

Note: Write member ID for each household member:

Begin guest code from 101
Food Given to animal code 201
Food Given to others code 301
Food left over code 401

Code 1: Cause of not taking meal

Yes, meal taken 1
Food was not available 2
Fasting 3
Sickness 4
Unwilling to take food 5
Currently staying away from HH 6
No a valid HH member 7
Breastfed child 8
Others (specify) 9

Code 2: Type of guest code

Relatives from outside village 1
Relatives from same village 2
Neighbors 3
Friends 4
Dignitary 5
Day labor working at house 6
Day labor working at field 7
Other 8

Code 3: Where meal was taken code

Respondent's home 1
Employer's house 2
Invitation 3
In market place/hotels 4
Absent 5

Household Number: **Module X3: Household Food Security**

Question		Code	Response	Item	Food frequency: <i>READ:</i> Now I would like to ask you about foods that the members of your household consumed at home. Could you please tell me how many days in the past week your household has eaten the following food items, prepared and/or consumed at home and what the source of the food was? Food Item	X3_07. Number of days eaten in previous 7 days: If 0 >> Next item CODE 1	X3_08. What was the main source of this food in the last 7 days? CODE 2
X3_01	In the past 4 weeks was there ever no food to eat of any kind in your house because of lack of resources to get food?	Yes 1 No 2 >> X3_03					
X3_02	How often did this happen in the past 4 weeks?	Rarely (1-2 times) 1 Sometimes (3-10 times) 2 Often (> 10 times) 3		1	Wheat flour (Roti, bread, noodles)		
				2	Rice		
				3	Potatoes, cassava, matoke and other roots/tubers		
X3_03	In the past 4 weeks did you or any household member go to sleep at night hungry because there was not enough food?	Yes 1 No 1 >> X3_05		4	Cereals (maize, sorghum, millet, barley)		
				5	Vegetables		
				6	Fruits/fruit juices (fresh and dry)		
X3_04	How often did this happen in the past 4 weeks?	Rarely (1-2 times) 1 Sometimes (3-10 times) 2 Often (> 10 times) 3		7	Beans, lentils, peas, nuts		
				8	Eggs		
				9	Dairy products (milk, cheese, yoghurt)		
X3_05	In the past 4 weeks did you or any household member go a whole day and night without eating anything at all because there was not enough food?	Yes 1 No 2 >> X3_07		10	Meat (goat, beef, lamb, pork)		
				11	Poultry (chicken, duck, pidgeon)		
				12	Fish (fresh and dry)		
				13	Oil/fats (ghee, butter, veg oil)		
X3_06	How often did this happen in the past 4 weeks?	Rarely (1-2 times) 1 Sometimes (3-10 times) 2 Often (> 10 times) 3		14	Sugar, Honey		
				15	Condiments (spices, ketchup)		
				16	Nuts and seeds (ground nut, simsim, sunflower)		
				17	Tobacco (Alcohol included)		

CODE 1 Food Frequency

Not eaten 0
 1 day 1
 2 days 2
 3 days 3
 4 days 4
 5 days 5
 6 days 6
 7 days 7

Code 2: Source of Food

Own production 1
 Hunting/gathering/fishing 2
 Bought using cash 3
 Bought on credit 4
 Borrowed (friends/relatives) 5
 Gifts (friends/relatives) 6
 Begging 7
 Received as payment 8
 Food assistance 9

Household Number:

Module Y: Nutrition Practices and Services (Female Enumerator)

Module Y1: Infant and Young Child Feeding (IYCF) Practices and Use of Micronutrients

Question Number	Questions	Response	Code
Y1_00	Is there any child less than 2 years in this household	<input type="text"/>	Yes No 2>> Module Y8

Instructions: Ask the following for the youngest child under two years of age in the household

Question Number	Questions	Youngest child <24 months	Code
Member ID-CHILD	Copy the child's name and ID from Module B	CHILD Name: _____ Mem ID <input type="text"/>	Name and Mem ID
Member ID-MOTHER	Note the child's mother's ID and name from Module B	MOTHER Name: _____ Mem ID <input type="text"/>	Name and Mem ID
Mem ID-FATHER	Note the child's father's ID and name from Module B	FATHER Name: _____ Mem ID <input type="text"/>	Name and Mem ID
Y1_01	Where was <NAME> delivered?	<input type="text"/>	Your home1 Natal house2 Other house3 Government/private hospital, clinic, UHC4 Other (specify)5

Household Number:

Question Number	Questions	Youngest child <24 months	Code
Y1_02	Who was present to help you during <NAME's> delivery? (Multiple response possible)	<div> <input type="text"/> <input type="text"/> </div> <div> <input type="text"/> <input type="text"/> </div>	Doctor1 Midwife/nurse2 Govt. Heath Worker (FWA/HA)3 BRAC SS4 BRAC SK5 IYCF Promoter6 Others NGO Worker7 TTBA8 TBA9 Village Doctor10 Homeopath Doctor11 Kabiraj/Herbal healer12 Spiritual Healer13 Pharmacy14 Husband15 Mother/Mother in law16 Other Family members17 Neighbors/ Friends18 Self19 Nobody20 Other (specify)21
Y1_03	Did anyone help you put the baby to the breast after birth?	<div> <input type="text"/> </div>	Yes1 No0
Y1_04	During the first 3 days after the baby was born, what was given to the child by you or anyone else? (Multiple response possible)	<div> <input type="text"/> </div> <div> <input type="text"/> </div> <div> <input type="text"/> </div>	Honey1 Mustard oil2 Plain water3 Sugar/glucose water4 Tea5 Cows milk6 Breast milk7 Other (specify)8 Do not remember88
Y1_05	Did you give the child colostrum?	<div> <input type="text"/> </div>	Yes (gave to child)1 No (did not give to child)2
Now we would like to ask you about what the child is eating now			
Y1_06	Is the child still breastfeeding?	<div> <input type="text"/> </div>	Yes1>> Y1_09 No2 Never3>> Y1_09
Y1_07	If no, at what age did you stop breastfeeding the child?	<div> <input type="text"/> </div>	Month Don't Know/cannot remember88

Household Number:

Question Number	Questions	Youngest child <24 months	Code
Y1_08	Why did you stop breastfeeding?	<input type="text"/>	Problems with breast (pain).....1 Child not suck well2 Not enough time to feed child3 Child already grown up/ No need for breast feeding4 Mother got pregnant.....5 New baby born6 Cracked nipples.....7 Felt not enough breast milk8 Other (specify)9
Y1_09	At what age did you start giving the following liquids/foods to the child? If mother fed her child any of the following food within the first 29 days (less than 1 months of age), this can be noted as “0” month.		
	1. Water	<input type="text"/>	Month At “0” month of age0 At “1” month of age1 At “2” months of age2 At “3” months of age3 At “12” months of age12 So on Don’t Know88 Not given yet99
	2. Other non breast milk liquids (sugar/glucose water, tea, fruit juice etc.)	<input type="text"/>	
	3. Cow/Goat milk	<input type="text"/>	
	4. Sooji, rice gruel, etc.	<input type="text"/>	
	5. Semi-solid foods (soft rice, khichuri, mashed potato, ripe banana, other mashed family foods etc.)	<input type="text"/>	
	6. Solid foods (such as rice, wheat, puffed/ pressed rice etc.)	<input type="text"/>	
	7. Fish	<input type="text"/>	
	8. Meat (chicken, mutton, beef, etc., khichuri with meat)	<input type="text"/>	
	9. Eggs	<input type="text"/>	
	10. Legumes (pulse, peas, etc)	<input type="text"/>	
	11. Green vegetables	<input type="text"/>	
	12. Snack foods (chanachur, chips)	<input type="text"/>	
The following questions are based on previous day recall, i.e., yesterday during the day and the night.			
Y1_10	How many times did you breastfeed [NAME] yesterday, during the day or night?	<input type="text"/>	Number of times Stopped breast feeding/Never breast fed99

Household Number:

Question Number	Questions	Youngest child <24 months		Code
Y1_11	Other than breast milk, how many times did [NAME] drink other milk, formula or yogurt yesterday, during the day or night? Do not include number of times the child was breastfed in this question. This variable is only to capture milk or milk products other than breast milk .	<input type="text"/>		Number of times Not given yet.....99
Y1_12	How many times did [NAME] eat solid, semi-solid or soft foods other than liquids yesterday, during the day or night? Semi-solid foods such as soft rice, mashed potato, ripe banana, other mashed family foods etc. Solid foods such as rice, wheat, puffed/pressed rice etc. Meals include both meals and snacks (other than trivial amounts)	<input type="text"/>		Number of times Not given yet.....99
Y1_13	Yesterday (during the day or the night) did you give any of the following liquids to the child?			
		Yesterday	Has the child ever had this liquid? (only if child 0-6 months old)	
Y1_13a	Breast milk	<input type="text"/>	<input type="text"/>	Yes.....1 No2
Y1_13b	Water	<input type="text"/>	<input type="text"/>	
Y1_13c	Baby formula (prepared food for child)	<input type="text"/>	<input type="text"/>	
Y1_13d	Any other kind of milk (powder, cow/goat milk etc.)	<input type="text"/>	<input type="text"/>	
Y1_13e	Fruit juice (made at home)	<input type="text"/>	<input type="text"/>	
Y1_13f	Fruit juice (purchased, packaged)	<input type="text"/>	<input type="text"/>	
Y1_13g	Water-based liquids, teas, sugar water, coffee	<input type="text"/>	<input type="text"/>	
Y1_14	Yesterday (during the day and the night), did you use a baby bottle to feed the child?	<input type="text"/>	<input type="text"/>	Yes.....1 No2
Y1_15	Did your child eat (or drink) any of the following foods yesterday (during the day or night)?			
Y1_15a	Rice	<input type="text"/>	<input type="text"/>	Yes.....1 No2
Y1_15b	Cereals such as wheat, pressed rice, puffed rice, suji	<input type="text"/>	<input type="text"/>	
Y1_15c	Purchased baby cereals (NAME: such as Cerelac) Add name of most common food that iron fortified. Country specific	<input type="text"/>	<input type="text"/>	
Y1_15d	Legume: daal	<input type="text"/>	<input type="text"/>	
Y1_15e	Green leafy vegetables	<input type="text"/>	<input type="text"/>	

Household Number:

Question Number	Questions	Youngest child <24 months		Code
Y1_15f	Pumpkin, orange yam, orange-red-flesh sweet potatoe, carrots, tomato (vitamin-A rich)	<input type="text"/>	<input type="text"/>	
Y1_15g	Any other vegetables (starchy vegetables: potatoes, yam, plantain)	<input type="text"/>	<input type="text"/>	
Y1_15h	Ripe papaya or mango	<input type="text"/>	<input type="text"/>	
Y1_15i	Other fruits such as oranges, banana, grapefruits	<input type="text"/>	<input type="text"/>	
Y1_15j	Any other fruits	<input type="text"/>	<input type="text"/>	
Y1_15k	Meat such as beef, mutton	<input type="text"/>	<input type="text"/>	
Y1_15l	Chicken, duck, pigeon	<input type="text"/>	<input type="text"/>	
Y1_15m	Liver, heart, kidneys	<input type="text"/>	<input type="text"/>	
Y1_15n	Fish	<input type="text"/>	<input type="text"/>	
Y1_15o	Eggs	<input type="text"/>	<input type="text"/>	
Y1_15p	Peanuts, groundnuts, other nuts	<input type="text"/>	<input type="text"/>	
Y1_15q	Milk (non-human milk – cow, goat or powder)	<input type="text"/>	<input type="text"/>	
Y1_15r	Milk products (yogurt, rice pudding etc.)	<input type="text"/>	<input type="text"/>	
Y1_15s	Fat (oil, butter, ghee)	<input type="text"/>	<input type="text"/>	
Y1_15t	Chips or chanachur	<input type="text"/>	<input type="text"/>	
Y1_15u	Bread or buns	<input type="text"/>	<input type="text"/>	
Y1_15v	Candies or chocolates	<input type="text"/>	<input type="text"/>	
Y1_15w	Any iron containing tablet, syrup or Sprinkles/monimix	<input type="text"/>	<input type="text"/>	
Y1_16	Have you ever heard of a powder called Sprinkles/ (show example packets) for putting in the food of young children?	<input type="text"/>		Yes.....1 No2>>Y1_31 Don't remember/don't know88>Y1_31
Y1_17	Where did you hear about this? (multiple answers possible)	<input type="text"/>		Pharmacy1 Doctor2 Brac health worker3 Other4 Don't remember/don't know88

Household Number:

Question Number	Questions	Youngest child <24 months	Code
Y1_18	Was (NAME) EVER given sprinkles/Monimix (a powder to mix in food)?	<input type="text"/>	Yes1 No2 >> Y1_22
Y1_19	Was (NAME) given sprinkles in the past one month?	<input type="text"/>	Yes1 No2
Y1_20	During the past 7 days, on how many days did you give sprinkles to (NAME)?	<input type="text"/>	Days Don't know/don't remember88
Y1_21	During the past 24 hours how many times did you give sprinkles to (NAME)?	<input type="text"/>	Time Don't know/don't remember88
Y1_22	Did you <u>receive</u> packets of sprinkles from anyone or any program at any time in last six months?	<input type="text"/>	Yes1 No2 >> Y1_25 Don't remember/don't know88 >> Y1_25
Y1_23	Where did you receive these Sprinkles from? (multiple answers possible)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Brac ss1 Brac sk2 Smc/other health workers3 Pharmacy4 Local shop5 Others (specify)6
Y1_24	How many packets of sprinkles did you receive in the last six months?	<input type="text"/>	Number Don't remember/don't know88
Y1_25	Did you <u>purchase</u> packets of sprinkles any time in last six months?	<input type="text"/>	Yes1 No2 Don't remember/don't know88
Y1_26	Did you <u>purchase</u> any packets of sprinkles in last one month?	<input type="text"/>	Yes1 No2 >> Y1_28 Don't remember/don't know88 > Y1_28
Y1_27	How many packets of sprinkles did you purchase in the last one month?	<input type="text"/>	Number Don't remember/don't know88
Y1_28	Where did you buy Sprinkles from the last time you purchased Sprinkles?	<input type="text"/>	BRAC SS1 BRAC SK2 SMC/other health workers3 Pharmacy4 Local shop5 Did not purchase6 Others (specify)7
Y1_29	How much did you pay for each Sprinkles packet, the last time you purchased Sprinkles?	<input type="text"/>	Taka Did not purchase9999

Household Number:

Question Number	Questions	Youngest child <24 months	Code
Y1_30	Which members of your family consumed Sprinkles in the last one week?	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Member ID No the family member consumed in last 1 week98
Y1_31	Did you ever purchase any <u>other</u> vitamins or mineral supplements in last six months? Give examples of locally available vitamins/minerals; <u>note this is other than sprinkles</u>	<input type="text"/>	Yes.....1 No.....2 Don't remember/don't know88
Y1_32	Did you purchase any vitamin or mineral supplements in last one month?	<input type="text"/>	Yes1 No2 Don't remember/don't know88
Y1_33	Can you tell us the name of the vitamin/mineral supplement you bought?	<input type="text"/>	Name of supplement Don't say name88 Did not purchase9999
Y1_34	Could you please check the empty bottle vitamin/Mineral/packet?	<input type="text"/>	Yes.....1 No.....2 Did not purchase9999
Y1_35	Which members of your family consumed the vitamin/mineral supplements in the last one week?	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Member ID None of the family member consumed in last 1 week 98

Household Number: **Module Y2: Nutrition Knowledge of Respondent Mothers**

Question Number	Questions	Response	Code
Y2_01	How long after birth should a baby start breastfeeding?	<input type="text"/>	Immediately 1 Less than 1 hour after delivery 2 Some hours later but less than 24 hrs 3 1 day later 4 More than 1 day later 5 Do not think baby should be breastfed 6 Don't know 88
Y2_02	What should a mother do with the “first milk” or colostrums?	<input type="text"/>	Throw it away and start breastfeeding when the real milk comes in 1 Give it to her baby by breastfeeding soon after birth 2 Other (specify) 3 Don't know 88
Y2_03	How often should a baby breastfeed?	<input type="text"/>	Whenever baby wants 1 When you see the baby is hungry 2 When the baby cries 3 Other (specify) 4 Don't know 88
Y2_04	If a mother thinks her baby is not getting enough breast milk, what should she do?	<input type="text"/>	Breastfeed more often/more frequently 1 Give other liquids/foods 2 Mother needs to drink more water 3 Mother needs to eat more food 4 Other (specify) 5 Don't know 88
Y2_05	Do you think that infants under 6 months of age should be given water if the weather is very hot?	<input type="text"/>	Yes 1 No 2 Don't know 88
Y2_06	At what age should a baby first start to receive liquids (including water) other than breast milk?	<input type="text"/>	Months Don't know 88
Y2_07	At what age should a baby first start to receive foods in addition to breast milk?	<input type="text"/>	Months Don't know 88
Y2_08	Name one thing that can happen to children if they do not get enough iron (either in their diet or via iron supplements).	<input type="text"/>	Impaired learning 1 Impaired development 2 Lower height 3 Weakened immune defense 4 Feel tired 5 Become anemic 6 Other (specify) 7 Don't know 88
Y2_09	What seasoning (food item) is often fortified with iodine (a nutrient important for brain development)?	<input type="text"/>	Salt 1 Other (specify) 2 Don't know 88
Y2_10	For how long do children need an extra meal per day after they have been sick? (a meal in addition to the ones they are fed usually)	Day <input type="text"/> Week <input type="text"/>	Day/Week Don't know 88

Household Number:

Question Number	Questions	Response	Code
Y2_11	What should you do when your child has diarrhea? (multiple answers possible)	<div><div></div><div></div><div></div><div></div><div></div><div></div></div>	ORS 1 Feed less than usual 2 Feed as much food as usual..... 3 Feed more than usual 4 Give less liquids than usual..... 5 Give as much liquids as usual 6 Give more liquids than usual 7 Continue breastfeeding 8 Breastfeed more often 9 Give syrups 10 Give traditional medicine..... 11 Give treated water 12 Give carrot juice or rice water..... 13 Give Zinc 14 Other (specify) 15 Don't know 88
Y2_12	When should you wash your hands? (multiple answers possible)	<div><div></div><div></div><div></div><div></div></div>	Before eating..... 1 After using the toilet 2 Before feeding the child..... 3 After cleaning a child who has defecated 4 Other (specify) 5 Don't know 88
Y2_13	What are some of the things we can do to encourage young children to eat their food? (multiple answers possible)	<div><div></div><div></div><div></div><div></div></div>	Feed slowly and patiently 1 Talk to the child 2 Force the child 3 Reduce distractions 4 Feed other foods 5 Change flavor of the food 6 Other (specify) 7 Don't know 88
Y2_14	What foods does a young child (<24 months) need in order to grow and develop their brain? (multiple answers possible)	<div><div></div><div></div><div></div><div></div></div>	Gruels/bread/rice..... 1 Gruel with milk..... 2 Animal foods such as meat or chicken 3 Fish 4 Eggs 5 Fruits..... 6 Vegetables 7 Milk 8 Pulses (daal)..... 9 Other (specify) 10 Don't know 88

Household Number:

Module Y3: Awareness-Trial-Adoption of Sentinel Practices

Question Number	I will now ask you about a few child feeding practices. Can you tell me if you have ever heard about any of the following child feeding practices?	A. Have you heard about....? yes1>>B No2>>Next row	B. If ans is 'yes' for A Where did you hear about this? Family Member 1 Friend/neighbor 2 Health worker 3 Nurse/dispensary 4 Radio 5 TV 6 BRAC 7 Religious Leader 8 Health Center 9 Other (specify) 10	C. Did you ever try this? Yes1 No 2>>D	D. If ans is no for C, ask: Can you tell me the main reason why you did not ever try this at home? Next Qs. Response Code	
Y3_01	Starting BF immediately after delivery within 1 hour?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Code 1↓
Y3_02	Not giving anything except breast milk to your child for six months	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Code 21↓
Y3_03	Feeding your baby adequate quantity of family foods in addition to BF from 7-24 months?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Code 3↓
Y3_04	Feeding animal foods like fish, egg, liver, meat at least once a day? (for child more than 6 months old)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Code 4↓
Y3_05	How to feed a child who has poor appetite?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Code 5↓
Y3_06	How fathers can support mothers to give enough time to the child for proper feeding?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Code 6↓

Code 1	Code 2	Code 3	Code 4	Code 5	Code 6
Do not know 1 Insufficient breast milk 2 Family members discouraged me..... 3 Other people discouraged me..... 4 Doctor forbid me..... 5 Did not feel it to be necessary 6 Other (specify) 7	Do not know..... 1 Mother did not want 2 Family members told me to feed something else..... 3 Others told me to feed something else 4 Insufficient breast milk 5 Other (specify) 6	Child does not like it 1 Not enough food at home 2 Did not have required ingredients... 3 Ingredients too expensive 4 Other (specify) 5	Do not know..... 1 Child does not like it 2 Did not have money 3 Fish, eggs, liver, meat too expensive 4 Other (specify) 5	Don't know how to do it 1 Did not have enough time 2 Family members did not help 3 Other (specify) 4	Do not know 1 I have enough time 2 Husband did not help..... 3 Others (specify) 4

Household Number: **Module Y4: Immunization and Health Status of Young Children (<2 years)**

Instructions: ask the following for any child under two years of age in the household, and also for the younger child, if the respondent mother has a second child less than 24 months of age. If she does not have a second child less than 24 months of age, complete the question for first child under two years of age and then go to next module

Important note: **finish asking all questions for the first child, and then ask the same set of questions for the younger child.**

Question number	Question	Response		Response Code
		Child < 24 months		
MEM_ID_CHILD	Copy the child's ID from module B	<input type="text"/>		Member ID
NAME_CHILD	Copy the child's name from Module B question B02	Name: _____		Name
MEM_ID_MOTHER	Copy the child's mother's ID from module B question B01	<input type="text"/>		Member ID- mother
MEM_ID_FATHER	Copy the child's father's ID from module B question B01	<input type="text"/>		Member ID - father
Y4_01	Present age of child in months	<input type="text"/>		Age in months
Y4_02	Gender of the child	<input type="text"/>		Boy..... 1 Girl..... 2
Y4_03	Birth Order (number)	<input type="text"/>		Write the exact number birth order of the child.
Y4_04	If the child is over 6 months old, has the child received vitamin A capsule in last 6 month?	<input type="text"/>		Yes 1 No 2 N/A (age<6 months)..... 9
	Immunization status of the child	From Health Card	From Mother	
	Check health card (if available) and based on the immunisation information given, fill up the following questions. If no card available then ask mother of child			
Y4_05	Which immunizations has the target child taken so far?			
Y4_05a	BCG	<input type="text"/>	<input type="text"/>	Yes 1 No 2
Y4_05b	DPT 1	<input type="text"/>	<input type="text"/>	Yes 1 No 2
Y4_05c	DPT 2	<input type="text"/>	<input type="text"/>	Yes 1 No 2

Household Number:

Question number	Question	Response				Response Code
		Child < 24 months				
Y4_05d	DPT 3	<input type="text"/>		<input type="text"/>		Yes 1 No 2
Y4_05e	Hepatitis B 1	<input type="text"/>		<input type="text"/>		Yes 1 No 2
Y4_05f	Hepatitis B 2	<input type="text"/>		<input type="text"/>		Yes 1 No 2
Y4_05g	Hepatitis B 3	<input type="text"/>		<input type="text"/>		Yes 1 No 2
Y4_05h	Penta (DPT, Hep-B, HIB) 1	<input type="text"/>		<input type="text"/>		Yes 1 No 2
Y4_05i	Penta (DPT, Hep-B, HIB) 2	<input type="text"/>		<input type="text"/>		Yes 1 No 2
Y4_05j	Penta (DPT, Hep-B, HIB) 3	<input type="text"/>		<input type="text"/>		Yes 1 No 2
Y4_05k	OPV 0 (at birth)	<input type="text"/>		<input type="text"/>		Yes 1 No 2
Y4_05l	OPV (Polio) 1	<input type="text"/>		<input type="text"/>		Yes 1 No 2
Y4_05m	OPV (Polio) 2	<input type="text"/>		<input type="text"/>		Yes 1 No 2
Y4_05n	OPV (Polio) 3	<input type="text"/>		<input type="text"/>		Yes 1 No 2
Y4_05o	Measles	<input type="text"/>		<input type="text"/>		Yes 1 No 2
Y4_05p	Vitamin A	<input type="text"/>		<input type="text"/>		Yes 1 No 2
		Child 1 < 24 months				
		A1	A2	A3	A4	
		Fever	Cough/cold	Fast breathing/short breathing	Diarrhea	
Y4_06	Has (NAME) had any of the following symptoms in the past two weeks?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Yes 1 No 2>END Don't Know 88>END

Household Number:

Question number	Question	Response				Response Code
		Child < 24 months				
Y4_07	Did you ask for advice or seek treatment when the child had (name illness/symptom) ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Yes 1 No 2>>END
		A1	A2	A3	A4	
		Fever	Cough/cold	Fast breathing/short breathing	Diarrhea	
Y4_08	Where ALL did you seek medical help or treatment for this illness (Please specify each illness to the respondent) (multiple responses possible)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Doctor 1 Midwife/nurse 2 Govt. Heath Worker (FWA/HA) 3 BRAC SS 4 BRAC SK 5 IYCF Promoter 6 Others NGO Worker 7 TTBA 8 TBA 9 Village Doctor 10 Homeopath Doctor 11 Kabiraj/Herbal healer 12 Spiritual Healer 13 Pharmacy 14 Husband 15 Mother/Mother in law 16 Other Family members 17 Neighbors/ Friends 18 Self 19 Nobody 20 Other (specify) 21
Y4_09	**FOR DIARRHEA ONLY**: What did you give the child when he/she had diarrhea (CIRCLE ALL MENTIONED BY RESPONDENT)?					ORS(bought) 1 Zinc tablets 2 Antibiotics 3 Home made ORS 4 Traditional medicine 5 Other 7 Nothing 99
Y4_10	Was NAME ever treated in a health center or hospital because he/she was very malnourished?	<input type="text"/>				Yes 1 No 2
Y4_11	Was NAME ever given special foods like this (SHOW PACKET OF RUTF) to take home and eat for a few weeks because he/she was very malnourished?	<input type="text"/>				Yes 1 No 2>>Y4_12

Household Number:

Question number	Question	Response	Response Code
		Child < 24 months	
Y4_11A	Where did you get this special food (SHOW PACKET OF RUTF)?	<input type="text"/>	Doctor 1 Midwife/nurse 2 Govt. Heath Worker (FWA/HA) 3 BRAC SS 4 BRAC SK 5 IYCF Promoter 6 Others NGO Worker 7 TTBA 8 TBA 9 Village Doctor 10 Homeopath Doctor 11 Kabiraj/Herbal healer 12 Spiritual Healer 13 Pharmacy 14 Husband 15 Mother/Mother in law 16 Other Family members 17 Neighbors/ Friends 18 Self 19 Nobody 20 Other (specify) 21
Y4_12	Has NAME ever been given any medicines for deworming (**need local term for 'deworming**)?	<input type="text"/>	Yes 1 No 2>>End module
Y4_13	When was the last time NAME was given a medicine for deworming?	<input type="text"/>	[] MONTHS AGO (*write 0 if less than 1 month ago)

Household Number:

Question number	Question	Response	Response Code
		Child < 24 months	
Y4_14	Where do you get the medicine from?	<input type="text"/>	Doctor 1 Midwife/nurse 2 Govt. Heath Worker (FWA/HA) 3 BRAC SS 4 BRAC SK 5 IYCF Promoter 6 Others NGO Worker 7 TTBA 8 TBA 9 Village Doctor 10 Homeopath Doctor 11 Kabiraj/Herbal healer 12 Spiritual Healer 13 Pharmacy 14 Husband 15 Mother/Mother in law 16 Other Family members 17 Neighbors/ Friends 18 Self 19 Nobody 20 Other (specify) 21

Household Number: **Module Y5: Nutrition related Prenatal Care during Pregnancy with Youngest Child**

Instructions: ask the following only in relation to the youngest child of the respondent

Question number	Question	Response	Response option
		Youngest child	
MEM ID_CHILD	Copy the child's ID from module B	<input type="text"/>	Member ID
NAME_CHILD	Copy the child's name from Module B	Name: _____	Name
Y5_01	How many antenatal care sessions did you attend when you were pregnant with this child	<input type="text"/>	Never..... 0 If attended, record exact number of sessions If number of session 3 or more Go to Y5_04
Y5_02	Where did you attend these sessions? If antenatal sessions attended "0" zero time then write "99=N/A" (Multiple Response)	<input type="text"/> <input type="text"/> <input type="text"/>	Government hospital 1 Upazila Health Complex 2 MCWC..... 3 Union Health and Family Welfare Center 4 NGO facility: (specify)..... 5 Private clinic 6 Satellite clinic/EPI Center 7 CNC 8 Private doctor (MBBS)..... 9 Pharmacy 10 Village doctor..... 11 Other (specify) 12 Don't know/cannot recall 88 Not applicable 99
Y5_03	During your pregnancy with this child, how often was your weight measured?	<input type="text"/>	Never..... 0 Once..... 1 2 times..... 2 3 times..... 3 4 times..... 4 5 times..... 5 6 times..... 6 More than 6 times 7
Y5_04	Did you participate in any feeding program during your pregnancy with this child?	<input type="text"/>	Yes 1 No 2>>Y5_10
Y5_05	Where did you attend this feeding program?	<input type="text"/>	At CNC 1 Other (specify) 2 Don't know/cannot remember... 8

Household Number:

Question number	Question	Response	Response option
		Youngest child	
Y5_06	For how many weeks did you get the additional food	<input type="text"/>	Number of weeks
Y5_07	Do you know why you received the food?	<input type="text"/>	Did not gain enough weight 1 Weight was too low 2 poor household 3 Other (specify) 4
Y5_08	Where was the food consumed	<input type="text"/>	In the center 1 At home 2
Y5_09	Did you share the food with others?	<input type="text"/>	Yes 1 No 2
Y5_10	Were you advised on what to eat or how to cook your food during pregnancy?	<input type="text"/>	Yes, on what to eat 1 Yes, on how to cook 2 Yes, on both eat and cook 3 No, I was not advised 4 >> Y5_13
Y5_11	Were you able to follow the advice you were given?	<input type="text"/>	Yes 1 No 2
Y5_12	If yes, how often do you follow the advice they gave you?	<input type="text"/>	Regularly 1 2/3 times a week 2 Once a week 3 2/3 times a month 4 Once a month 5 Less than once a month 6 Never 7
Y5_13	How many Tetanus Toxoid (TT) vaccinations did you have during your pregnancy with this child?	<input type="text"/>	None 0 One 1 Two 2 Don't know/cannot remember... 8
Y5_14	Did you take iron tablets/supplements during your pregnancy with this child?	<input type="text"/>	Yes 1 No 2 >> Y5_19 Don't know/cannot remember... 8

Household Number:

Question number	Question	Response		Response option
		Youngest child		
Y5_15	Where did you get the iron tablets? (multiple responses)	<input type="text"/>	<input type="text"/>	Government hospital 1 Upazila Health Complex 2 MCWC..... 3 Union Health and Family Welfare Center 4 NGO facility (specify)..... 5 Private clinic 6 Satellite clinic/EPI Center 7 CNC 8 Private doctor (MBBS)..... 9 Pharmacy 10 Village doctor..... 11 Other (specify) 12 Don't know/cannot recall 88 Not applicable 99
Y5_16	From which month of pregnancy did you start taking iron tablets/supplements?	<input type="text"/>	<input type="text"/>	Month
Y5_17	During your pregnancy for this child, for how many months did you take iron tablets or supplements so far?	<input type="text"/>	<input type="text"/>	Number of Months iron suppliment taken If less than 1 month write 1. Don't know/cannot remember...88
Y5_18	Per month, how many days did you take iron tablets or supplements?	<input type="text"/>	<input type="text"/>	Number of days
Y5_19	Were you given a vitamin A capsule after delivery?	<input type="text"/>	<input type="text"/>	Yes 1 No 2 Don't know/cannot recall 88
Y5_20	Place of delivery for this child? (in case of govt. or private facility specify where it was)	<input type="text"/>	<input type="text"/>	Government hospital 1 Upazila Health Complex 2 MCWC..... 3 Union Health and Family Welfare Center 4 NGO facility(specify)..... 5 Private clinic 6 Satellite clinic/EPI Center 7 Home (self or relatives)..... 8 Other (specify) 9 Don't know/cannot recall 88 Not applicable 99
Y5_21	Geographic place of delivery	<input type="text"/>	<input type="text"/>	Locally (home, facility)..... 1 In mother's natal/family area 2 Others (specify)..... 3

Household Number:

Question number	Question	Response		Response option
		Youngest child		
Y5_22	Who helped with the delivery of this child?	<input type="text"/>	<input type="text"/>	Doctor/nurse/ midwife..... 1 Govt. Heath Worker (FWA/HA) 2 Trained Birth Attendant 3 Traditional Birth Attendant 4 Village doctor..... 5 NGO worker..... 6 Relative(s)..... 7 Neighbors/ Friends 8 Others (specify)..... 9
Y5_23	How soon was the baby weighed after birth?	<input type="text"/>	<input type="text"/>	Within 24 hours..... 1 Between 1-3 days 2 Between 4 days and 1 week 3 In the second week 4 After 2 weeks 5 Weight not taken 6 >> END MODULE
Y5_24	Who weighed the baby?	<input type="text"/>	<input type="text"/>	Government hospital 1 Upazila Health Complex 2 MCWC..... 3 Union Health and Family Welfare Center 4 NGO facility (specify)..... 5 Private clinic 6 Satellite clinic/EPI Center 7 CNP from CNC..... 8 Private doctor (MBBS)..... 9 Pharmacy 10 Village doctor..... 11 Other (specify) 12 Don't know/cannot recall 88 Not applicable 99
Y5_25	What was the weight of the baby (check card if possible)?	<input type="text"/>	<input type="text"/>	Weight in kg

Household Number: **Module Y6: Access to Community Nutrition Centre (CNC) and use of NNP Services for Children <2 years**

For upazilas stated to be national nutrition program upazilas

Question Number	Question	Response			Response Code
	ACCESS to CNC	A	b	c	
Y6_01	Is there anyone in this household who uses or has used CNC and obtains/obtained services there?	<input type="text"/>			Yes..... 1 No 2 >> END
Y6_02	Who in your household uses/used the CNC and obtains services there?	<input type="text"/>	<input type="text"/>	<input type="text"/>	Put member id from roster
Y6_03	Is/was receiving service as	<input type="text"/>	<input type="text"/>	<input type="text"/>	As under 2 year old child 1 As mother of under 2 child 2 As Current pregnant woman 3 As adolescent girl (13-19)age ... 4 As newlywed woman..... 5
Y6_04	Is this person still receiving service from CNC	<input type="text"/>	<input type="text"/>	<input type="text"/>	Yes..... 1 No 2
Y6_05	How long has this person been going or went to the CNC?	<input type="text"/>	<input type="text"/>	<input type="text"/>	In months If less than one month put 0
Y6_06	How often does/did this person go to the CNC?	<input type="text"/>	<input type="text"/>	<input type="text"/>	Daily 1 Twice a week 2 Once a week..... 3 Once biweekly 4 Once a month..... 5 Once in a quarter..... 6 Once in 6 months 7 Irregular 8

Household Number: **Module Y7: NNP Services Usage by Children under 2 years of age**

Only ask for children living in NNP upazilas

Instructions: Ask the following for the youngest child under two years of age in the household

Question number	Question	Response	Response Code
		Youngest Child < 24 months	
MEM ID_CHILD	Copy the child's ID from module B	<input type="text"/>	Member ID
NAME_CHILD	Copy the child's name from Module B	Name: _____	Name
MEM ID_MOTHER	Copy the child's mother's ID from module B	<input type="text"/>	Member ID- mother
MEM ID_FATHER	Copy the child's father's ID from module B	<input type="text"/>	Member ID – father
Y7_01	Has NAME ever been taken to a growth monitoring session (explain – growth monitoring sessions are where the child's weight is taken and marked on a chart)?	<input type="text"/>	Yes 1 No.....2>> Y7_05
Y7_02	In the past 1 year, how often was NAME taken to growth monitoring sessions?	<input type="text"/>	Never 1>> Y7_05 Once a month 2 Once in 2-5 months 3 Twice a year 4 Once a year 5
Y7_03	Where did you attend these sessions? [if never attended put not applicable=99]	<input type="text"/>	Government hospital 1 Upazila Health Complex 2 MCWC 3 Union Health and Family Welfare Center 4 NGO facility (specify) 5 Private clinic 6 Satellite clinic/EPI Center 7 CNP from CNC 8 Private doctor (MBBS) 9 Pharmacy 10 Village doctor 11 Other (specify) 12 Don't know/cannot recall 88 Not applicable 99
Y7_04	Do you have the growth card for this child?	weight in kg <input type="text"/> age in months <input type="text"/>	Yes (if so check card and note weight and age in months at which last growth monitoring was done) Card have but not write age or weight....88 No.....99

Household Number:

Question number	Question	Response	Response Code
		Youngest Child < 24 months	
Y7_05	Has NAME ever participated in the supplementary PUSTI Packet feeding program?	<input type="text"/>	Yes 1 No.....2>>END
Y7_06	How old was the child when supplemental PUSTI Packet feeding started?	<input type="text"/>	Age in months
Y7_07	Why was the child enrolled in the PUSTI Packet feeding program?	<input type="text"/>	Did not gain enough weight..... 1 Weight was too low2 Ultra poor household3 Other4
Y7_08	If participated, how often was the child taken for supplementary PUSTI Packet feeding?	<input type="text"/>	Daily..... 1 3-5 times a week.....2 Less than 3 times a week3
Y7_09	Where did the child attend the PUSTI Packet supplementary feeding sessions?	<input type="text"/>	Government hospital 1 Upazila Health Complex2 MCWC3 Union Health and Family Welfare Center4 NGO facility (specify).....5 Private clinic.....6 Satellite clinic/EPI Center7 CNP from CNC8 Other (specify).....12 Don't know/cannot recall88 Not applicable99
Y7_10	Did the child eat the food at the center?	<input type="text"/>	Yes 1>>END No, food taken at home2
Y7_11	If no, who ate the food at home?	<input type="text"/>	Child him/herself 1 Child and siblings2 Other siblings3 Other family members4

Household Number: **Module Y8: Exposure to Nutrition Information from Health Workers and Media**

Question Number	Questions	Response	Response Code
Y8_01	Have you been visited at home by <u>any health worker in the last six months?</u>	<input type="text"/>	Yes 1 No 2>> Y8_06 Don't know 8>> Y8_06
Y8_02	Do you know where this health worker came from/who the health worker worked for?	<input type="text"/>	See codes from list below
Y8_03	How many times in the last six months were you visited at home by a health worker?	<input type="text"/>	Number of times Don't remember 88
Y8_04	During the last visit, did you receive any advice from the health worker on feeding your child?	<input type="text"/>	Yes 1 No 2>> Y8_06
Y8_05	What advice did you receive from the health worker on feeding your child?	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Putting baby to breast immediately after birth..... 1 Giving only colostrums 2 No pre- or post lacteals (honey/mustard oil/glucose water) 3 Feed only breast milk up to six Months..... 4 Positioning & Attachment 5 Attachment 6 Feeding mashed family food after 6 months 7 Feeding animal source foods 8 Cooking/adding with oil 9 Adding Sprinkles..... 10 Washing hands with water and soap before prep/feeding child..... 11 Feeding during illness/extra after illness 12 Other (specify) 13 Respondent did not mention any of the above on her own 99
Y8_06	Have you ever attended any group meetings/discussions where health or nutrition issues were discussed?	<input type="text"/>	Yes 1 No 2>> Y8_08
Y8_07	Last time you attended a group discussion about health/nutrition, what was discussed?	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Family planning..... 1 Water and sanitation..... 2 Immunization 3 Maternal nutrition..... 4 TB 5 Breastfeeding..... 6 Complementary feeding 7 Sprinkles..... 8 Washing hands with water and soap before prep/ feeding child 9 Encouraging child to eat enough..... 10 Feeding during illness/extra after illness..... 11 Other (specify)..... 12

Household Number:

			Respondent did not mention any of the above on her own 99
Media Related			
Y8_08	Do you usually listen to Radio? This can be anywhere, in your house, or anywhere outside of your house.	<input type="text"/>	Yes 01 No 02 >>Y8_11
Y8_09	Have you recently heard any advertisement on the Radio on breastfeeding or complementary feeding? (Note: recently means anytime in the last 3 months)	<input type="text"/>	Yes 01 No 02 >>Y8_11 Do not know 88 >>Y8_11
Y8_10	What different things were said in these advertisements about child feeding? DO NOT PROMPT	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 	A mother of a new born baby 1 Breast feed the baby immediately (in the first hour) after birth 11 The baby needs to be fed breast milk immediately to protect from various sicknesses 12 The baby cannot be fed anything other than breastmilk 13 Father brings tinned milk for baby 2 Any other food or drink other than breastmilk is harmful for the baby during the first 6 months after birth 21 The baby urinates minimum 6 times a day 22 The baby plays and sleeps well 23 For the first 6 months, only breast milk is sufficient for the baby 24 If mother breastfeeds the baby frequently taking sufficient time then the baby will get adequate milk 25 Father helps the mother with household chores so that she has enough time to breastfeed the child 26 Even a malnourished mother can sufficiently breastfeed her child for the first 6 months 27 House is on fire 3 It is very important to take good care of the baby at early stage of life 31 In the first 2 years, a child's brain develops fast 32 Appropriate food should be brought from the market when complementary feeding starts 33 Father helps the mother with household chores so that she has enough time to feed the child 34 Mother cooking fish 4 Today the babu will eat fish 41 The baby likes to eat egg, fish and chicken liver 42 Everyday I feed him/her at least one of these items 43 These foods are necessary for the baby's body and brain 44 Tumpa won a prize 5 It is important for the mother to take a lot of care about what food is given to

Household Number:

			<p>the child and in what quantity from the baby's early childhood.....51 From 7 months onwards, a baby should have ½ bowl of food twice a day52 From 9 month onwards, a baby should have ½ bowl of food thrice a day53 From 12 month onwards, a baby should have 1 bowl of food thrice a day54 Family food should be given along with nutritious snacks55</p> <p>The baby goes to sleep without eating6 Baby please eat, please eat61 My baby darling, eat a little62 Do not feed the child forcefully63 Feed your child with patience64 Do not fill his small stomach with foods like chips, biscuit and juice.....65 Instead of giving same food everyday, give him different foods and this will increase his appetite66</p> <p>Other IYCF message.....7</p>
Y8_11	Do you usually watch television? This can be anywhere, in your house, or anywhere outside of your house.	<input type="text"/>	<p>Yes01 No2>>END MODULE</p>
Y8_12	Have you recently watched any advertisement on the TV on breastfeeding or complementary feeding? (Note: recently means anytime in the last 3 months)	<input type="text"/>	<p>Yes01 No02>>Y8_14 Do not know.....88>>Y8_14</p>
Y8_13	What different things were said in these advertisements about child feeding? DO NOT PROMPT	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<p>A mother of a new born baby.....1 Breast feed the baby immediately (in the first hour) after birth 11 The baby needs to be fed breast milk immediately to protect from various sicknesses 12 The baby cannot be fed anything other than breastmilk 13</p> <p>Father brings tinned milk for baby2 Any other food or drink other than breastmilk is harmful for the baby during the first 6 months after birth.....21 The baby urinates minimum 6 times a day22 The baby plays and sleeps well23 For the first 6 months, only breast milk is sufficient for the baby24 If mother breastfeeds the baby frequently taking sufficient time then the baby will get adequate milk25 Father helps the mother with household chores so that she has enough time to breastfeed the child26 Even a malnourished mother can sufficiently breastfeed her child for the first 6 months.....27</p> <p>House is on fire3 It is very important to take good care of the baby at early stage of life.....31 In the first 2 years, a child's brain develops fast32 Appropriate food should be brought from the market when complementary feeding starts33</p>

Household Number:

			<p>Father helps the mother with household chores so that she has enough time to feed the child.....34</p> <p>Mother cooking fish4 Today the babu will eat fish41 The baby likes to eat egg, fish and chicken liver.....42 Everyday I feed him/her at least one of these items43 These foods are necessary for the baby's body and brain44</p> <p>Tumpa won a prize5 It is important for the mother to take a lot of care about what food is given to the child and in what quantity from the baby's early childhood.....51 From 7 months onwards, a baby should have ½ bowl of food twice a day52 From 9 month onwards, a baby should have ½ bowl of food thrice a day53 From 12 month onwards, a baby should have 1 bowl of food thrice a day54 Family food should be given along with nutritious snacks55</p> <p>The baby goes to sleep without eating6 Baby please eat, please eat61 My baby darling, eat a little62 Do not feed the child forcefully63 Feed your child with patience64 Do not fill his small stomach with foods like chips, biscuit and juice.....65 Instead of giving same food everyday, give him different foods and this will increase his appetite66</p> <p>Other IYCF message.....7</p>
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Instruction for Interviewer: Show PHOTO on each TVC one by one, and collect responses for each TVC.

Now, I will show you photos of a TV advertisement to remind you about the content of that TV advertisement.

TVC 1: Mother of new born baby - Now I'll show you some photographs from a TV advertisement on new born baby

Y8_14	Have you seen this advertisement in TV?	<input type="text"/>	Yes 1 No 2>>Go to TVC 2
Y8_15	What is the TV spot asking the viewer to do?	<input type="text"/>	Initiate feeding breast milk immediately (in the first hour) after birth 1 Not to feed the baby anything other than breast milk2 Other77 Don't Know.....99

TVC 2: Father brings tinned milk for baby: Now I'll show you some photographs from a TV advertisement on breastfeeding

Y8_16	Have you seen this advertisement in TV?	<input type="text"/>	Yes 1 No 2>> Go to TVC 3
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Household Number:

Y8_17	What is the TV spot asking the viewer to do?	<input type="text"/>	Not to feed the baby anything other than breast milk for the first 6 months 1 Malnourished mothers can also sufficiently breastfeed their child for 6 months 2 Other77 Don't Know.....99
TVC 3: The house is on fire: Now I'll show you some photographs from a TV advertisement on a burning house			
Y8_18	Have you seen this advertisement in TV?	<input type="text"/>	Yes 1 No 2>> Go to TVC 4
Y8_19	What is the TV spot asking the viewer to do?	<input type="text"/>	To take good care of the baby at early stage of life1 Buy nutritious foods for the baby2 Mother should allocate enough time to feeding the child3 Other77 Don't Know.....99
TVC 4: Mother is cooking fish: Now I'll show you some photographs from a TV advertisement on cooking fish			
Y8_20	Have you seen this advertisement in TV?	<input type="text"/>	Yes 1 No 2 Go to TVC 5
Y8_21	What is the TV spot asking the viewer to do?	<input type="text"/>	Feed the child egg, fish, chicken liver along with other food for the growth and development of the child1 Other77 Don't Know.....99
TVC 5: Tumpa wins the prizes: Now I'll show you some photographs from a TV advertisement on sports			
Y8_22	Have you seen this advertisement in TV?	<input type="text"/>	Yes 1 No 2>> Go to TVC 6
Y8_23	What is the TV spot asking the viewer to do?	<input type="text"/>	To take care of what the child is being feed and the quantity of the meal 1 From 7 months onwards, feed the baby ½ bowl of food twice a day 2 From 9 month onwards, feed the baby ½ bowl of food thrice a day .3 From 12 month onwards, feed the baby 1 bowl of food thrice a day 4 Family food should be given to the baby along with nutritious snacks 5 Other77 Don't Know.....99
TVC 6: Child goes to sleep without eating: Now I'll show you some photographs from a TV advertisement on child feeding			
Y8_24	Have you seen this advertisement in TV?	<input type="text"/>	Yes1 No2 >>END MODULE
Y8_25	What is the TV spot asking the viewer to do?	<input type="text"/>	Feed the child with patience 1 Not to fill the child's stomach with chips, juice, biscuits.....2 Feed the child different types of food to increase the child's appetite 3 Other77 Don't Know.....99

Household Number: **Module Z: Women's Status (Female Enumerator)**

Sl no	Question	Response	Response Code
Z_1	Member ID of child's mother	<input type="text"/>	Member ID
Z_2	Marital Status Code	<input type="text"/>	Never Married 1 Married, lives with husband 2 Married, does not live with husband 3 Widow 4 Divorced 5 Separated/Deserted 6

Module Z1: Work Earnings and Expenses

Question Number	Question	Response	Response Code
Z1_01	Are you now doing any work or business that brings in cash, additional food, or allows you to accumulate assets for your household? (<i>Note: if the woman says no, check she does not engage in agriculture, petty trade, money lending, etc</i>)	<input type="checkbox"/>	Yes 1 >> Z1_04 No 2
Z1_02	If not, why?	<input type="checkbox"/>	Husband / in-laws won't allow 1 >> Z1_03 Society doesn't like it 2 >> Z1_03 Take care of children/household work 3 >> Z1_12 I don't want to 4 >> Z1_12 I don't need to 5 >> Z1_12 Am unable to work 6 >> Z1_12 Lack of demand for the work that I have skill to do 7 >> Z1_12 Other (specify) 8 >> Z1_12 Don't know 9 >> Z1_12
Z1_03	Why won't your husband or your in-laws, or society let you work?	<input type="checkbox"/>	Believes women should not work to earn income... 1 Household has enough income 2 Wants me to look after household work 3 Doesn't want me to mingle with other men 4 Other (specify) 5 Don't know 6
Z1_04	Would your husband or in-laws allow you to engage in a business or earn additional money from working inside your home?	<input type="checkbox"/>	Yes 1 No 2 >> Z1_12
Z1_05	Where do you work to earn income?	<input type="checkbox"/>	Inside the home 1 Outside 2 Both 3
Z1_06	Whose decision was it to work to earn income?	<input type="checkbox"/>	Yourself 1 Your husband 2 Self and husband 3 Someone else (specify) 4
Z1_07	At first did your husband or other household member want to prevent you from working to earn money?	<input type="checkbox"/>	Yes 1 No 2 >> Z1_09

Household Number:

Question Number	Question	Response	Response Code
Z1_08	If yes, why?	<input type="checkbox"/>	Believes women should not work 1>> Z1_10 Household has enough income 2>> Z1_10 Wants me to look after household work . 3>> Z1_10 Doesn't want me to mingle with other men4>> Z1_10 Other (specify)..... 5>> Z1_10 Don't know.....6
Z1_09	If no, why?	<input type="checkbox"/>	Husband/other household members unable to work1 Money/food was short.....2 Other (specify).....3
Z1_10	What do you do with the money you earn?	<input type="checkbox"/>	Give it all to my husband / other family member....1 Give some to husband / other member.....2 Keep all3
Z1_11	Who usually decides how to spend the money you earn?	<input type="checkbox"/>	Yourself.....1 Your husband2 Self and husband3 Someone else (specify).....4
Z1_12	Have you ever taken any loans from an NGO?	<input type="checkbox"/>	Yes.....1 No.....2>>Z1_15
Z1_13	Whose decision was it to take the loan from the NGO?	<input type="checkbox"/>	Yourself.....1 Your husband2 Self and husband3 Someone else (specify).....4
Z1_14	Who usually decides how to spend the money from the loan?	<input type="checkbox"/>	Yourself.....1 Your husband2 Self and husband3 Someone else (specify).....4
Z1_15	Who decides how to spend money on the following items?		
Z1_15a	Food	<input type="checkbox"/>	Yourself.....1 Your husband2 Self and husband3 Someone else (specify).....4 Not applicable5
Z1_15b	Housing	<input type="checkbox"/>	
Z1_15c	Health Care	<input type="checkbox"/>	
Z1_15d	Education	<input type="checkbox"/>	
Z1_15e	Clothing	<input type="checkbox"/>	
Z1_16	Do you yourself control the money needed to buy the following?		
Z1_16a	Food from the market	<input type="checkbox"/>	Yes1 No.....2
Z1_16b	Clothes for yourself	<input type="checkbox"/>	
Z1_16c	Medicine for yourself	<input type="checkbox"/>	
Z1_16d	Toiletries/cosmetics for yourself	<input type="checkbox"/>	

Household Number:

Module Z2: Mobility

Place code	Places	Who decides whether you can go by yourself to the following places? Yourself.1 Your husband2 Self and husband3 Others (specify)4 Not applicable5	If your husband or other household member objects, in what circumstances would they allow you to go? If I have company (relatives, children)1 If I can arrange my own expenses2 If I follow purdah / dress acceptably3 Other (specify)4 Not applicable/would not object if I go alone... 5
		Code ↑	Code ↑
Z2_01	Outside the community to visit friends or relatives		
Z2_02	Haat/Bazaar		
Z2_03	Hospital/Clinic/Doctor		
Z2_04	Cinema/Fair/Theatre		
Z2_05	Training for NGO/Programs		

Household Number: **Module Z3: Reproductive Decisions**

Question Number	Question	Response	Response Code
Z3_01	Have you ever used birth control (methods to delay or avoid pregnancy?)	<input type="checkbox"/>	Yes.....1 No.....2>>Z3_03 Not applicable.....3 END MODULE
Z3_02	Who made this decision? (After filling this question's response skip to Z3_04)	<input type="checkbox"/>	Yourself 1 >> Z3_04 Your husband 2>> Z3_04 Self and husband 3>> Z3_04 Someone else (specify)..... 4>> Z3_04
Z3_03	Why have you not used birth control?	<input type="checkbox"/>	Husband didn't allow1 Makes me feel weak / ill.....2 Didn't feel the need to3 Other (specify)4
Z3_04	Has your husband ever used any birth control method?	<input type="checkbox"/>	Yes1 No2 Not applicable3
Z3_05	Is the man sterilized?	<input type="checkbox"/>	Yes.....1 No.....2
Z3_06	Is the woman sterilized?	<input type="checkbox"/>	Yes.....1 No.....2

Note: If the answer to both question Z3_1 and Z3_4 is NO, please make sure that neither the man nor the woman is sterilized.

Household Number:

Module Z4: Domestic Violence, Abuse and Threats

Question Number	Question	Response	Response Code
Z4_01	Has any of the following happened to you in the past year?	<input type="checkbox"/>	
Z4_01A	Your husband threatened you with divorce?	<input type="checkbox"/>	Yes, often1 Yes, sometimes2
Z4_01B	Your husband threatened you with taking another wife?	<input type="checkbox"/>	Has threatened and divorced/remarried3 No4 Not applicable9
Z4_01C	Your husband, another family member, or household resident verbally abused you?	<input type="checkbox"/>	
Z4_01D	Your husband, another family member, or household resident physically abuse you?	<input type="checkbox"/>	
Z4_02	If any answer to Z4_1A-D is YES, did you want to leave?	<input type="checkbox"/>	Yes.....1 No.....2 END MODULE
Z4_03	Did you leave?	<input type="checkbox"/>	Yes, permanently.....1 END MODULE Yes, but I came back.....2 No.....3
Z4_04	If you did not leave permanently, why not?		He was angry and didn't mean it1 My husband and I came to an agreement2 I could not support myself financially3 My parents could not support me financially4 I came back for my children5 Because of social pressure.....6

☐

Household Number:

Module Z5: Wife's Assets that had been brought to Marriage

Question Number	Question	Response	Response Code
Z5_01	When you married, did you bring any assets from your parent's home?	<input type="checkbox"/>	Yes..... 1>>go to next question No 2 → End module

Name of asset	Asset (see Asset Code below)	Value of asset at time of marriage (Taka)
Name	Z5_02	Z5_03

Asset Codes			
Consumption Assets (for household use)			
House structure (excluding land) 1	Radio/Cassette player 11	Mobile telephone / phone 21	Fishing net 54
Large tree 2	Wall clock/Watch 12	Hand tube well 22	Iron 55
Trunk/Suitcase 3	TV/VCR/CD 13	Livestock (for own consumption)..... 23	Hand tube well 56
Bucket/Pots 4	Refrigerator..... 14	Poultry (for own consumption)..... 24	Irrigation equipment, including pump 57
Stove/Gas burner..... 5	Jewelry (gold/silver) 15	Cash 25	Boat 58
Metal cooking pots..... 6	Sewing machine..... 16	Mattress..... 26	Livestock 59
Bed/Khat/Chowki 7	Bicycle..... 17	Quilt 27	Poultry 60
Armoire/Cabinet/Alna..... 8	Rickshaw 18	Pillow 28	Other agricultural equipment 61
Table/chair 9	Motorcycle..... 19	Other assets (list) 29	Other vehicles 62
Fans/Iron 10	Other motor vehicle 20		Charcoal maker..... 63
		Productive Assets (for earning income)	Other production assets (list) 64
		Sewing machine 51	
		Rickshaw / van 52	
		Mobile phone / phone..... 53	

Household Number:

Module WE: Women's Empowerment in Agriculture (WEI) Index

INSTRUCTIONS ON ADMINISTRATION:

Enumerator: This questionnaire should be administered to individuals identified in the household roster (Section WB) of the household level questionnaire as the primary and secondary respondents. You should complete this coversheet for each individual identified in the "selection section" even if the individual is not available to be interviewed for reporting purposes. Please double check to ensure:

- You have completed the household questionnaire, at least the first 2 modules;
- You have identified the correct individual;
- You have noted the household ID and individual ID correctly for the person you are about to interview;
- You have gained informed consent for the individual in the household questionnaire;
- You have sought to interview the individual in private or where other members of the household cannot overhear or contribute answers.

Module WA: Individual Identification

Household Identification	Code	Interview details	Code
WA01. Household Identification:	<input type="text"/> <input type="text"/> <input type="text"/>	WA07. Start time of interview (hh:mm=> write in 24 hr time format)	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>
WA02. Census number:	<input type="text"/> <input type="text"/> <input type="text"/>	WA08. End time of interview (hh:mm=> write in 24 hr time format))	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>
WA03. Name of primary respondent (code from roster in Section B): Last, First:	<input type="text"/> <input type="text"/>	WA09. Name/code of enumerator:	<input type="text"/> <input type="text"/>
WA04. Name of respondent (code from roster in Section B of household questionnaire): Last, First:	<input type="text"/> <input type="text"/>	WA10. Sex of enumerator: Male1 Female2	<input type="text"/>
WA05. Sex of respondent: Male..... 1 Female 2	<input type="text"/>	WA11. Outcome of interview (enter code from Code 2 ↓):	<input type="text"/> <input type="text"/>
WA06. Type of household (enter code from Code 1 ↓):	<input type="text"/>	WA12. Ability to be interviewed alone (enter code from Code 3 ↓):	<input type="text"/>

Code list for Module WA:

Code 1 (WA06) : Type of Household:	Code2 (WA11): Outcome of interview	Code 3 (WA12): Ability to be interviewed alone
Male and Female adult1	Completed1	Alone1
Female, no Male adult2	Incomplete2	With other adult females present2
Male, no Female adult3	Absent.....3	With other adult males present3
No adult4	Refused4	With other adults mixed sex present.....4
	Could not locate.....5	With children present5

Household Number:

MODULE WB: (Dimension 1): Role in household decision-making around production and income generation

Enumerator: The purpose of this module is to get an idea about men's and women's relative roles in decision making around income-generating activities. Do not attempt to ensure that responses are the same between the male and female respondent. It is okay for them to be different.

RANDOMIZATION: Enumerator, please check the start time of the interview. If the interview started on an even minute (0, 2, 4, 6 or 8) please follow OPTION A. If the interview started on an odd minute (1,3, 5, 7 or 9) please administer OPTION B. Check which option you follow:

• Option A: Read additional example questions for WB02/WB03 highlighted in grey. ☐

• Option B: DO NOT read additional example questions for WB02/WB03 highlighted in grey. ☐

Code 1: Input into decision making

No input 1
Input into very few decisions 2
Input into some decisions 3
Input into most decisions 4
Input into all decisions 5
Decision not made/not applicable 6

Activity		Did you (singular) participate in [ACTIVITY] in the past 12 months? Yes 1 No 2 >> next activity	How much input did you have in making decisions about [ACTIVITY]? CODE 1↑	How much input did you have in decisions on the use of income generated from [ACTIVITY]? CODE 1↑
ActivityCode	Activity Description	WB01	WB02	WB03
1	Food crop farming: crops that are grown primarily for household food consumption Option A (WB02/WB03 only): For example, did you have input into decisions about what crops to plant this year or in which plots they would be planted, or which seeds, fertilizer (other inputs) your family would buy?	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Cash crop farming : crops that are grown primary for sale in the market Option A (WB02/WB03 only): For example, did you have input into decisions about how much of your family's land would be used for growing cash crops, or about the crops to be grown for sale, and the inputs to be used for those crops?	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	Livestock raising: Option A (WB02/WB03 only): For example, did you have input into decisions about the purchase, care, or sale of livestock?	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	Non-farm economic activities:small business, self employment, buy-and-sell Option A (WB02/WB03 only): For example, did you have input into purchases made for a small business or goods sold?	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	Wage and salary employment: in-kind or monetary work both agriculture and other Option A (WB02/WB03 only): For example, did you have input into decisions about if you or other household members would work outside of the housed?	<input type="text"/>	<input type="text"/>	<input type="text"/>
6	Fishing or fish culture Option A (WB03 only): For example, did you have input into decisions about when to do fishing, or how to stock a fish pond, inputs for fish culture?	<input type="text"/>	<input type="text"/>	<input type="text"/>

Household Number: **MODULE WC: (Dimension 2) Access to productive capital**

Enumerator: The purpose of this module is to get an idea about men's and women's access to capital or assets and their ability to control use of the resource. Again, do not attempt to ensure that responses are the same between the male and female respondent. It is okay for them to be different. **In the case the respondent has no spouse or partner, please enter 98 in WC07 and WC08.**

Productive Capital		Does anyone in your household currently have any [ITEM]? Yes 1 No 2 >> next item	How many of [ITEM] does your household currently have?	Who would you say owns most of the [ITEM]? CODE 1↓	Who would you say can use the [ITEM] most of the time? CODE 1↓	Who would you say can decide whether to sell [ITEM] most of the time? CODE 1↓	Who would you say can decide whether to give away [ITEM] most of the time? CODE 1↓	Who would you say can decide to mortgage or rent out [ITEM] most of the time? CODE 1↓	Who would you say would keep the majority of [ITEM] in the case a marriage is dissolved because of divorce or separation? CODE 1↓	Who would you say would keep the majority of [ITEM] in the case a marriage is dissolved because of death? CODE 1↓	Who contributes most to decisions regarding a new purchase of [ITEM]? CODE 1↓
Productive Capital		WC01a	WC01b	WC02	WC03	WC04	WC05	WC06	WC07	WC08	WC09
A	Agricultural land (pieces/polts)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
B	Large livestock (oxen, buffalo)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
C	Small livestock (goats, sheep)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D	Chickens, Ducks, Turkeys, Pigeons	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E	Fish pond or fishing equipment	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F	Farm equipment (non-mechanized)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
G	Farm equipment (mechanized)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
H	Nonfarm business equipment	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
I	House (and other structures)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
J	Large consumer durables (fridge, TV, sofa)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
K	Small consumer durables (radio, cookware)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
L	Cell phone	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
M	Other land not used for agricultural purposes (residential /commercial land)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
N	Means of transportation (bicycle, rickshaw, motorcycle, car)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

CODE 1

Self1	Self and other household member 5	Self, spouse and other outside people9
Spouse2	Spouse and other household member..... 6	Someone (or group of people) outside the household.....10
Self and spouse jointly3	Self and other outside people..... 7	
Other household member4	Spouse and other outside people 8	

Household Number:

MODULE WC: (Dimension 2) (continued)

Lending sources		Has anyone in your household taken any loans or borrowed cash/in-kind from [SOURCE] in the past 12 months? Yes, cash 1 Yes, in-kind 2 Yes, cash and in-kind 3 No 4 >> next source Don't know 5 >> next source	Who made the decision to borrow from [SOURCE]? CODE 1	Who makes the decision about what to do with the money/ item borrow from [SOURCE]? CODE 1
Lending source names		WC10	WC11	WC12
1	Non-governmental organization (NGO)	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Informal lender	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	Formal lender (bank/financial institution)	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	Friends or relatives	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	ROSCA (savings/credit group)	<input type="text"/>	<input type="text"/>	<input type="text"/>

CODE 1 : Decision-making and control over capital		
Self1 Spouse2 Self and spouse jointly3 Other household member4	Self and other household member 5 Spouse and other household member 6 Self and other outside people..... 7 Spouse and other outside people 8	Self, spouse and other outside people9 Someone (or group of people) outside the household.....10

MODULE WC: (Dimension 2) (continued)

QNo.	Question	Response	Response options
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Household Number:

WC13	Where do you typically get information on farming or livestock related topics such as new seeds, technology, crop rotation or animal health?	<input type="text"/>	Government agency or outlet1 NGO or NGO outlet2 Private shop/suppliers3 Community members or cooperative.....4 Family member5 Media (radio/TV/newspaper)6 Not applicable/do not get advice7
WC14	Have you (yourself) ever met with an agricultural extension worker or livestock/fisheries extension worker in the past 12 months?	<input type="text"/>	Yes.....1 No2 >> Next section
WC15	How many times did you meet with the agricultural extension worker or livestock/fisheries worker in the past 12 months?	<input type="text"/>	[Enter number of visits]
WC16	The last time you met with an extension worker, were they a male or female?	<input type="text"/>	Male1 Female2 Both male and female.....3

MODULE WD: (Dimension 3) Income

Enumerator: The purpose of this module is to get an idea about how the surplus of household, men's and women's incomes, after food needs are met, is allocated among other expenditure categories: Do not attempt to ensure that responses are the same between male and female respondent. It is okay for them to be different.

Household Number:

QNo.	Question	Response	Response options/Instructions
WD01	Do you alone have any money you can decide what to spend on?	<input type="text"/>	Yes.....1 No2
WD02	In comparison to your partner, do you; [READ RESPONSES]: Enumerator: Skip this question if the respondent has no partner. If the respondent has more than one spouse/partner, ask in relation to the individual being interviewed in the parallel individual questionnaire.	<input type="text"/>	Earn more money than him/her1 Earn less money than him/her2 Earn about the same money as him/her3 Partner does not earn money4 I do not earn money5 Both partner and I do not earn money6 Do not know how much partner earns7 Not Applicable98
Question: Household level			
WD03	In the last 12 months, after providing food for the family, what did your household spend your remaining money on? Enumerator: List up to 5 in order of importance [DO NOT PROMPT]. If answer to WD03 is from 1-20, go to WD05	<div style="display: flex; justify-content: space-around; margin-bottom: 5px;"> ABCDE </div> <div style="display: flex; justify-content: space-around;"> <input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/> </div>	Clothes/shoes for myself1 Clothes/shoes for my spouse2 Clothes/shoes for my children3 School fees of school supplies for children4 Consumer durables5 Fix or improve house6 Buy asset for farming7 Buy asset for business8 Buy jewelry9 Services (beauty/hair/etc)10 Lend money to friends and relatives11 Make religious/ charitable donations12 Travel to visit friends/relatives13 Save for future14 Medicines or health needs15 Communication (airtime)16 Buy consumables (toiletries, paraffin, etc.)17 Social events (weddings/funerals/sports)18 Drinking alcohol and smoking19 Unknown how the money was spent20 Household or myself has no money98>>WD04
WD04	In the last 12 months, if the household did not have any remaining money, what is the reason? Enumerator: List up to 3 in order of importance. Do not prompt.	<div style="display: flex; justify-content: space-around; margin-bottom: 5px;"> ABC </div> <div style="display: flex; justify-content: space-around;"> <input type="text"/><input type="text"/><input type="text"/> </div>	Bad harvest1 Irregular income/business is slow2 Other negative shock (illness)3 Unexpected expenditures4 No control over extra money5
Question: Individual level			

Household Number:

<p>WD05</p>	<p>In the last 12 months, after providing food for the family, what did you (singular) spend your remaining money on?</p> <p>Enumerator: List up to 5 in order of importance Do not prompt. If answer to WD05 is from 1-20, go to Module WE</p>	<table border="1"> <tr> <td>A</td> <td>B</td> <td>C</td> <td>D</td> <td>E</td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </table>	A	B	C	D	E	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<p>Clothes/shoes for myself1 Clothes/shoes for my spouse2 Clothes/shoes for my children3 School fees of school supplies for children4 Consumer durables5 Fix or improve house6 Buy asset for farming7 Buy asset for business8 Buy jewelry9 Services (beauty/hair/etc).....10 Lend money to friends and relatives11 Make religious/ charitable donations12 Travel to visit friends/relatives13 Save for future14 Medicines or health needs.....15 Communication (airtime)16 Buy consumables (toiletries, paraffin, etc.)17 Social events (weddings/funerals/sports).....18 Drinking alcohol and smoking.....19 Unknown how the money was spent.....20 Household or myself has no money.....98>>WD06</p>
A	B	C	D	E									
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>									
<p>WD06</p>	<p>In the last 12 months, if you (singular) did not have any remaining money, what is the reason?</p> <p>Enumerator: List up to 3 in order of importance. Do not prompt</p>	<table border="1"> <tr> <td>A</td> <td>B</td> <td>C</td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </table>	A	B	C	<input type="text"/>	<input type="text"/>	<input type="text"/>	<p>Bad harvest1 Irregular income/business is slow.....2 Other negative shock (illness)3 Unexpected expenditures.....4 No control over extra money5</p>				
A	B	C											
<input type="text"/>	<input type="text"/>	<input type="text"/>											

Household Number: **MODULE WE: (Dimension 4) Individual leadership and influence in the community**

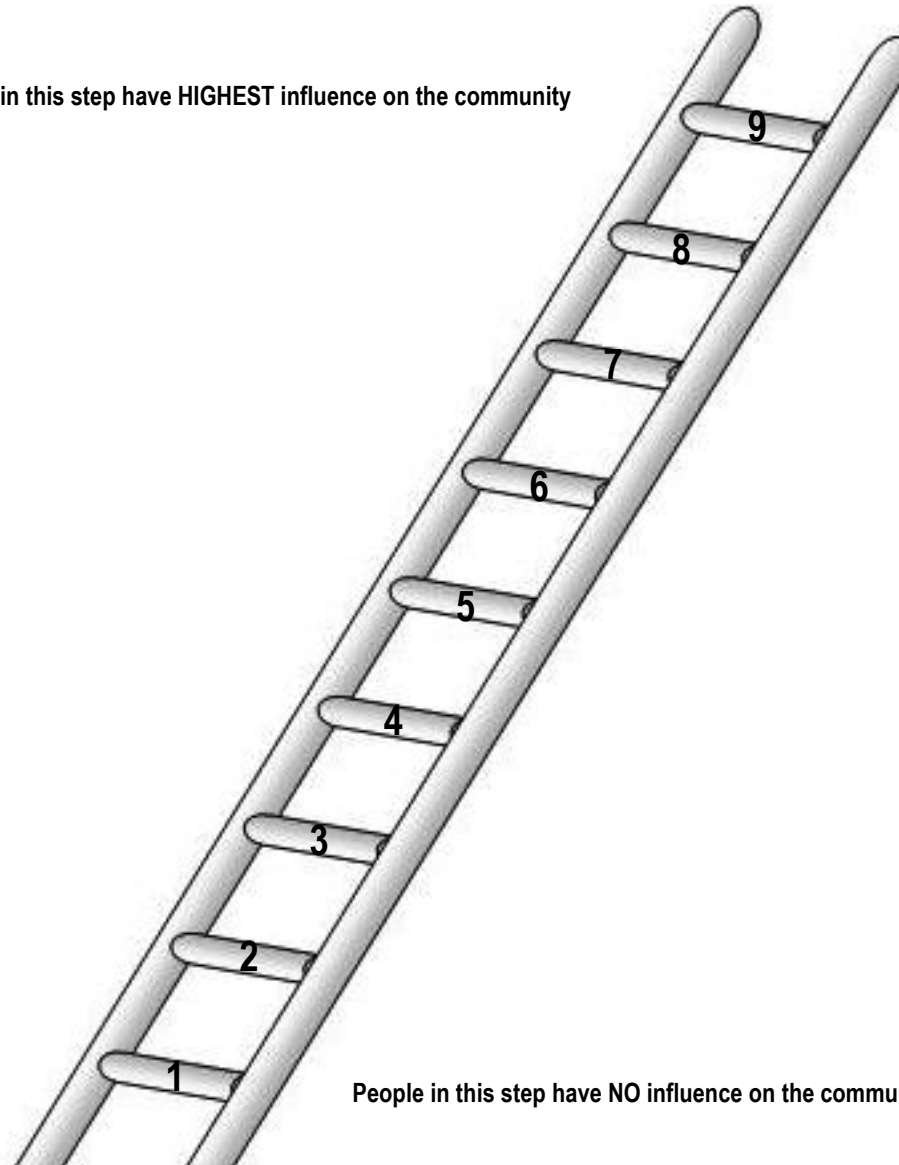
Enumerator: The purpose of this module is to get an idea about men's and women's potential for leadership and influence in the communities where they live. Again, do not attempt to ensure that responses are the same between the male and female respondent. It is okay for them to be different.

QNo.	Question	Response	Response options/Instructions
WE01	Do you feel that a [man / woman] like yourself can generally change things in the community where you live if s/he wants to?	<input type="text"/>	No, not at all 1 Yes, but with a great deal of difficulty 2 Yes, but with a little difficulty 3 Yes, fairly easily 4 Yes, very easily 5
WE02	Do you feel comfortable speaking up in public:		
WE02A	To help decide on infrastructure (like small wells, roads, water supplies) to be built in your community?	<input type="text"/>	No, not at all comfortable 1 Yes, but with a great deal of difficulty 2 Yes, but with a little difficulty 3 Yes, fairly comfortable 4 Yes, very comfortable 5
WE02B	To ensure proper payment of wages for public work or other similar programs?	<input type="text"/>	
WE02C	To protest the misbehavior of authorities or elected officials?	<input type="text"/>	
WE02D	To intervene in case of a family dispute?	<input type="text"/>	
WE03	Have you ever voted in a local or national election?	<input type="text"/>	Yes 1 >> WE04 No 2 >> WE05
WE04	If yes, during the last time you voted, did you cast your vote for the person you chose yourself or your spouse chose or somebody else chose?	<input type="text"/>	Yourself 1 Spouse 2 Other relative 3 Somebody else 4 Does not remember 5
WE05	In the last 12 months, have you		
WE05A	Contributed money or time to building small wells or maintenance of irrigation facilities in your community?	<input type="text"/>	Yes 1 No 2
WE05B	Contributed money or time to building or maintaining roads in your community?	<input type="text"/>	Yes 1 No 2
WE05C	Contributed money or time to town development projects or public works projects in your community?	<input type="text"/>	Yes 1 No 2
WE05D	Contributed money or time to building or maintaining your local mosque/church/temple?	<input type="text"/>	Yes 1 No 2
WE05	In the last year, did you give money to any other family because someone in their family was sick?	<input type="text"/>	Yes 1 No 2
WE05F	In the last year, did you help another family out with agricultural labor?	<input type="text"/>	Yes 1 No 2
WE05G	In the last year, did you help another family out when they needed help with child care?	<input type="text"/>	Yes 1 No 2

Household Number:

QNo.	Question	Response	Response options/Instructions
WE06.	Please imagine a nine-step ladder, where on the bottom, the first step, stand people who have NO influence on the community, and step 9, the highest step, stand those who have influence in the community. On which step are you?	<input type="text"/>	[Enter step 1 – 9] Enumerator Show the ladder in the next page

People in this step have HIGHEST influence on the community



People in this step have NO influence on the community

Household Number: **MODULE WE: (Dimension 4) Individual leadership and influence in the community (continued)**

Group membership		Are you an active member of any [GROUP]?	Do you have a leadership position in this [GROUP]?	Have you ever had a leadership position in this [GROUP]?	How much input do you have in making decisions in this [GROUP]?	Is this a single-sex group?	How often does the [GROUP] meet?	Out of the last 5 meetings, how many did you attend?
		Yes 1 No 2 >> next group	Yes 1 >>WE10 No 2	Yes 1 No 2	No input.....1 Input into very few decisions2 Input into some decisions3 Input into most decisions4 Input into all decisions5	Yes 1 No 2	More than once a week .. 1 Once a week 2 Once every two weeks..... 3 Once a month 4 Less than once a month .. 5	[Number of meetings]
	Group Names	WE07	WE08	WE09	WE10	WE11	WE12	WE13
A	Agricultural / livestock/ fisheries producer's group (including marketing groups)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
B	Water users' group	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
C	Forest users' group	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D	Credit or microfinance group (incl. ROSCAs/merry-go-rounds)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E	Mutual help or insurance group (including burial societies)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F	Trade and business association	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
G	Civic groups (improving community) or charitable group (helping others)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
H	Local government	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
I	Religious group	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
J	Other women's group (only if it does not fit into one of the other categories)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
K	Other (specify)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Household Number:

MODULE WF: (Dimension 5) Time allocation

Enumerator: The purpose of this module is to get an idea about men's and women's time spent in both work and leisure activities and their satisfaction with their time use.

WF01: Please record a log of the activities for the individual in the last complete 24 hours (starting yesterday morning at 4 am, finishing 3 am of the current day). The time intervals are marked in 15 min intervals and one to two activities can be marked for each time period by drawing a line through that activity. If two activities are marked, they should be distinguished with a P for the primary activity and S for the secondary activity written next to the lines. Please administer using the protocol in the enumeration manual.

	If simultaneous: Primary.... 1 Secondary 2	Activity↓	Night		Morning		Day																			
			4	5	6	7	8	9	10	11	12	13	14	15												
A		Sleeping and resting																								
B		Eating and drinking																								
C		Personal care																								
D		School (also homework)																								
E		Work as employed																								
F		Own business work																								
G		Farming																								
H		Construction																								
I		Fishing																								
J		Shopping/getting service																								
K		Weaving, sewing, textile care																								
L		Cooking																								
M		Domestic work																								
N		Care for children/adults/elderly																								
O		Commuting																								
P		Travelling																								
Q		Watching TV/listening to radio																								
R		Reading																								
S		Sitting with family																								
T		Exercising																								
U		Social activities																								
V		Practicing hobbies																								
W		Religious activities																								
X		Other, specify...																								

WF01: Continued

Household Number:

Enumerator: The purpose of this module is to get an idea about men's and women's time spent in both work and leisure activities and their satisfaction with their time use.

WF01: Please record a log of the activities for the individual in the last complete 24 hours (starting yesterday morning at 4 am, finishing 3 am of the current day). The time intervals are marked in 15 min intervals and one to two activities can be marked for each time period by drawing a line through that activity. If two activities are marked, they should be distinguished with a P for the primary activity and S for the secondary activity written next to the lines. Please administer using the protocol in the enumeration manual.

	If simultaneous: Primary.... 1 Secondary 2	Activity↓	Day				Evening	Night																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
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Household Number:

QNo.	Question	Response	Response options/Instructions						
WF02	Was yesterday a holiday or nonworking day?	<input type="text"/>	Yes1 No2						
WF03	Regarding the amount of sleep you got last night, was that [READ RESPONSES]:	<input type="text"/>	Less than average1 Average2 More than average3						
WF04	READ: I am going to ask you a series of questions and I want you to tell me how would you rate your satisfaction on a scale of 1 to 10, where 1 means you are not satisfied and 10 means you are very satisfied. If you are neither satisfied or dissatisfied this would be in the middle or 5 on the scale. How would you rate your satisfaction with:								
WF04A	The distribution of work duties within your household?	<input type="text"/>	Please mark on a scale from 1 – 10 Not satisfied ☹1 <div style="text-align: center;">↓</div> Neither satisfied nor dissatisfied ☹5 <div style="text-align: center;">↓</div> Very satisfied ☺10						
WF04B	Your available time for leisure activities like visiting neighbors, watching TV, listening to radio, seeing movies or doing sports?	<input type="text"/>							
WF04C	Your contacts with friends or relatives?	<input type="text"/>							
WF04D	Your possibilities of going to other places outside your village?	<input type="text"/>							
WF04E	Your power to make important decisions that change the course of your life?	<input type="text"/>							
WF04WF	Your satisfaction with your life overall?	<input type="text"/>							
WF05	During the last four weeks, how many days of your primary daily activities did you miss because of poor health?	<input type="text"/>	Enter number of days [1-28]						
WF06	Were the last four weeks typical or average?	<input type="text"/>	Worse than average1 Average2 Better than average3						
WF07	Were you unable to complete normal activities in the last 24 hours?	<input type="text"/>	Yes1 No2						
WF08	Do you suffer from a chronic disability?	<input type="text"/>	Yes1 No2 >> WF10						
WF09	If yes, what kind? [ALLOW UP TO 3 RESPONSES]	<table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td>WF09_a</td><td>WF09_b</td><td>WF09_c</td></tr> <tr> <td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr> </table>	WF09_a	WF09_b	WF09_c	<input type="text"/>	<input type="text"/>	<input type="text"/>	Deaf or hearing disability1 Mobility or missing limbs2 Speech or language disability3 Learning or mental impairment4 Blind or visual disability5 Chronic health or disease6 Psychological or emotional7 Other, specify8
WF09_a	WF09_b	WF09_c							
<input type="text"/>	<input type="text"/>	<input type="text"/>							
ENUMERATOR: If male, stop and proceed to next Module; If female, continue with WF10.									
WF10	Are you currently pregnant?	<input type="text"/>	Yes1 No2						
WF11	Are you currently breastfeeding?	<input type="text"/>	Yes1 No2						

MODULE WG: Decision making

Household Number:

Enumerator: The purpose of this module is to get additional information about decision making within households.
Again, do not attempt to ensure that responses are the same between the male and female respondent. It is okay for them to be different.

Serial no	ENUMERATOR: Ask WG01 for all categories of decision making domains before asking WG02.	When decisions are made regarding the following aspects of household life, who is it that normally takes the decision? Main male or husband 1 Main female or wife..... 2 Husband and wife jointly..... 3 Someone else in the household 4 Jointly with someone else inside the household 5 Jointly with someone else outside the household 6 Someone outside the household/other..... 7 Decision not made 98	To what extent do you feel you can make your own personal decisions regarding these aspects of household life if you want(ed) to? Not at all 1 Small extent..... 2 Medium extent..... 3 To a high extent..... 4
		WG01	WG02
A	Agricultural production?	<input type="text"/>	<input type="text"/>
B	What inputs to buy for agricultural production?	<input type="text"/>	<input type="text"/>
C	What types of crops to grow for agricultural production?	<input type="text"/>	<input type="text"/>
D	When or who would take crops to the market?	<input type="text"/>	<input type="text"/>
E	Livestock raising?	<input type="text"/>	<input type="text"/>
F	Non-farm business activity?	<input type="text"/>	<input type="text"/>
G	Your own wage or salary employment?	<input type="text"/>	<input type="text"/>
H	Minor household expenditures?	<input type="text"/>	<input type="text"/>
I	What to do if you have a serious health problem?	<input type="text"/>	<input type="text"/>
J	How to protect yourself from violence?	<input type="text"/>	<input type="text"/>
K	Whether and how to express religious faith?	<input type="text"/>	<input type="text"/>
L	What kind of tasks you will do on a particular day?	<input type="text"/>	<input type="text"/>
M	Whether or not to use family planning to space or limit births?	<input type="text"/>	<input type="text"/>

MODULE WG: Decision making (continued)

Household Number:

Serial no.	ENUMERATOR: This is the last set of questions and it is very important. I am going to give you some reasons for why you might undertake activities in the domains I just mentioned. You might have several reasons for doing each one and there is no right or wrong answer. Please tell me how true it would be to say:	Your actions with respect to [DOMAIN] are motivated by a desire to avoid punishment or gain reward? [READ OPTIONS] CODE 1↓	Your actions with respect to [DOMAIN] are motivated by a desire to avoid blame or so that other people speak well of you? [READ OPTIONS] CODE 1↓	Your actions with respect to [DOMAIN] are motivated by and reflect your own values and/or interests? [READ OPTIONS] CODE 1↓	How satisfied were you with the decisions made in [DOMAIN]? [READ OPTIONS] CODE 2↓
		WG03	WG04	WG05	WG06
A	Agricultural production?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
B	What inputs to buy for agricultural production?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
C	What types of crops to grow for agricultural production?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D	When or who would take crops to the market?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E	Livestock raising?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F	Nonfarm business activity?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
G	Your own wage or salary employment?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
H	Minor household expenditures?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
I	What to do if you have a serious health problem?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
J	How to protect yourself from violence?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
K	Whether and how to express religious faith?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
L	What kind of tasks you will do on a particular day?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
M	Whether or not to use family planning to space or limit births?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

CODE 1: Motivation for activity	CODE 2: Extent of satisfaction with activity
Always true.....1	Very satisfied1
Somewhat true.....2	Somewhat satisfied2
Not very true.....3	Neither satisfied nor dissatisfied3
Never true.....4	Somewhat dissatisfied4
Decision not made98	Very dissatisfied5
	Decision not made.....98