

LAGOS SERVICE DELIVERY SURVEY

Spatial information, questionnaire and enumeration data:

(Italics used for data coding only)

Questionnaire no. (to be filled in by **data entry** persons):

Enumeration area code (to be filled in by **enumeration supervisors**):

Suburb or settlement name(to be filled in by **enumeration supervisors**)

Ward Name and Number(to be filled in by **enumeration supervisors**)

Local Government Authority (to be filled in by **enumeration supervisors**):

Date of Interview

Enumerator's name:

Supervisor's name:

Number:

Number:

Date: (*e.g. code 2204*)

Time start: (eg. 0820)

Time finish: (eg. 1540)

* Visiting point address:

* Physical coordinates:

Latitude: _____

Longitude: _____

Altitude: _____

INTRODUCTION

Hello. My name is _____. Your household has been randomly selected to participate in the Lagos Service Delivery Survey which has been commissioned by the Lagos State government. The aim of this survey is to collect information on social services such as water, electricity, drainage and gather your views on community development. The interview will take less than an hour. Your response will assist the state government in understanding the barriers to improved quality of life.

We assure you that your answers will be completely confidential. Only summary information will be used, and no individual questionnaire will be made available to any authority. If there is any particular question that you don't like to answer, that will of course be accepted.

We greatly appreciate your assistance and we thank you for your cooperation.

Interview: Please interview head of household, wife or a senior member of the household

Thank you for your cooperation

SECTION 1: HOUSEHOLD INFORMATION

1.1. Indicate the **number** of people who lived here for **more than 9 months** during this past year in the following table:

Age	Male	Female
Children under 5		
Children 5-14		
Adults 15-65		
Adults above 65		
Total		

Thank you for your cooperation

1.2. HOUSEHOLD ROSTER

	NAME	Relation to head of household Head = 1 Spouse= 2 Own Child= 3 Step Child= 4 Grandchild= 5 Brother/Sister = 6 Niece/Nephew= 7 Brother/Sister - in-law= 8 Parent =9 Parent-in-Law= 10 Other relative= 11 Maid/Nanny House servant=12 Non-relative=13	Sex Male=1 Female= 2	Age (in completed years)	School attendance Never attended school=1 Still in school=2 Left school after completion=3 Left school without completion=4	Highest educational level None Primary incomplete=1 Primary complete=2 Secondary complete=3 Secondary incomplete=4 University degree=5 Vocational degree=6 Other = 7	Main activity Unemployed=1 Regular skilled employee=2 Regular unskilled employee=3 Casual skilled employee=4 Casual unskilled employee=5 Self-employed (own business)=6 Unpaid household worker=7 Student/apprentice=8 Pensioner=9 Sick/disabled=10 Other, specify=11	Primary mode of travel Walk=1 Bicycle=2 Okada = 3 Public Bus=4 Shared taxi=5 Microbus=6 Car=7 Boat = 8 Other, specify=9	Is [NAME] immunized against BCG (TB vaccine)? Complete=1 Incomplete=2 Partial=3 No=4
Adult 1 Respondent									
Adult 2									
Adult 3									
Adult 4									
Adult 5									
Adult 6									
Adult 7									
Adult 8									
Adult 9									
Adult 10									
Child 1									
Child 2									
Child 3									
Child 4									
Child 5									
Child 6									
Child 7									
Child 8									
Child 9									
Child 10									

Thank you for your cooperation

SECTION 2: TYPE OF HOUSING

2.1. What type of house does your household live in? (*Interviewer mark from observation*)**Formal**

Single-household house or brick structure on a separate stand or yard	1
Multi-household house or brick structure on a separate stand or yard	2
Flat in a block of flats/high rise building	3
Bungalow, storey building, town house	4
Unit in housing estate or retirement village	5
Room in main dwelling	6
Room in hostel	7
Other: Specify	8

Informal

Shack, NOT in backyard, e.g. in an informal/squatter settlement	10
Shack in the backyard of a formal house (Boys quarters)	11
Other: Specify	12

2.2. **Excluding bathrooms, toilets, kitchens and pantry store**, how many rooms are there in this house?

	Rooms
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2.3. Do other households share this dwelling with you?

Yes = 1	No = 2
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2.4 How long has your household been living in this house?

	Years
--	-------

2.5. What type of material has been used in your house? (*Interviewer mark from observation*)

Roof		Walls		Floor	
Mud/Mud Bricks	1	Mud/mud bricks	1	Earth/Mud	1
Thatch	2	Stone	2	Wood or Tile	2
Wood/Bamboo	3	Burnt bricks	3	Plank	3
Corrugated Iron Sheets	4	Cement/concrete	4	Concrete	4
Cement/concrete	5	Wood/bamboo	5	Dirt/straw	5
Roofing tiles	6	Corrugated Iron sheets	6	Other, specify ____	6
Asbestos	7	Cardboard	7		
Other, specify _____	8	Other, specify _____	8		

2.6. What is your present occupancy status?

Dwelling owned by head	1	⇒ 2.7
Dwelling owned by head & spouse	2	⇒ 2.7
Dwelling owned by spouse	3	⇒ 2.7
Dwelling owned by another member of household	4	⇒ 2.7
Household rents the dwelling at market rent	4	⇒ 2.8
Household rents the dwelling and pays nominal/subsidized rent	5	⇒ 2.8
Uses without paying rent	6	⇒ Section 3
Nomadic or temporary dwelling	7	⇒ Section 3

2.7. Do you or a member of your household have the title or permit to live in this house? ⇒ Section 3

Yes	1	No	2
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2.8. Who do you pay this rent to?

Private person not related to you/ employer / agency	1
Relative NOT living on site	2
Relative living on site	3
Government/Parastatal/Council	4
Other: Specify	5

Thank you for your cooperation

2.9. How much do you pay in cash for the rent? _____ Naira

Time unit:

Daily =1 Weekly = 2 Monthly = 3 Quarterly = 4 Half-yearly = 5 Yearly = 6
Other, specify time unit _____=7

2.10. What charges does this amount include?

	1=Yes 2=No
House rent	
Land rent	
Toilet and/or sanitation	
Waste removal	
Water	
Energy and/or electricity	
Other: Specify	

SECTION 3: LAND AND TENURE

3.1. Do you have ownership title to the land on which this house is built?

1 Yes ⇒ 3.6	2. No ⇒ 3.2	3. Expecting transfer from council
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3.2. Do you pay anything for the land?

1 Yes	2 No ⇒ 3.5
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3.3. Who do you pay this to?

Private person not related to you/ employer / agency NOT living on site	1
Private person not related to you/ employer / agency living on site	2
Relative NOT living on site	3
Relative living on site	4
Government/Parastatal	5
Other: Specify	7
Don't know/Not applicable	8

3.4. How much do you pay for this land **alone**? _____ Naira

Time unit

Daily =1 Weekly = 2 Monthly = 3 Quarterly = 4 Half-yearly = 5 Yearly = 6
Other, specify time unit _____=7

3.5. Why don't you pay for this land although it does not belong to you/a member of your household?

Illegal occupation	1
Temporary occupation	2
Land belongs to a relative	3
Other: specify	4

3.6. How did you acquire this land?

Government transfer or subsidy	1
Purchased from a private person	2
Illegal occupancy/squatting	3
Other: Specify (e.g. community arrangement, swapped, inherited from relatives, ...)	4

SECTION 4: ACCESS TO INFRASTRUCTURE - STORM WATER DRAINAGE

4.1 Did you experience any flooding in your house in the last one year?

Yes ☐ 1 No ☐ 2

4.2 Did you experience any flooding in your street in the last one year? Yes

☐ 1 No ☐ 2

4.3 Did your household spend anything on damage repairs following the flood in your house?

1=Yes ⇒ 4.4 2=No ⇒ 4.5

Thank you for your cooperation

4.4 How much did your household spend in the last one year to repair damage caused by flood in your house.

Nairas

4.5 Usually how high is the water level in your house when it floods? Mark in one box below

- Ankle deep

1

- Knee deep

2

- Waist level or above

3

4.6. Are there any drains/gutters on your street?

Yes: 1 \Rightarrow 4.7

No: 2 \Rightarrow 4.10

4.7 How are the gutters cleaned?

- By community

1= Yes 2= No

- By government employed personnel

1 = Yes 2=No

4.8. Do you contribute to the maintenance of gutters? 1= Yes \Rightarrow 4.9 2= No \Rightarrow 4.10

4.9. What is your household's contribution to the maintenance of the gutters?

- By manual labor work: on average how many hours per month?

Hrs.

- By payment: on average how much per month?

N

4.10. If there is a need for users to pay in order to get the drains or gutters working, would you be willing to pay every month?

Yes

1

No

2

SECTION 5: ACCESS TO INFRASTRUCTURE - SANITATION

5.1. What type of toilet facility is available to your household? How many families share it and where is it located?

Mark as many as relevant.

	!	Number of families that share it.	Location: Outside house on plot =1 \Rightarrow 5.3 Inside house on plot =2 \Rightarrow 4.5 \Rightarrow 5.3 Outside plot/public chemical toilet =3 \Rightarrow 5.2
Flush to piped sewer system	1		
Flush to septic tank	2		
Flush/pour flush to pit	3		
Flush/pour flush elsewhere	4		
Composting toilet	5		
VIP/pit latrine with slab	6		
Covered pit latrine	7		
Uncovered Pit latrine	8		
Pan/Bucket	9		
Hanging toilet/Toilet on water	10		
No facilities/bush/field	11		
Other (specify)	12		

5.2. If you had an option, would you prefer a toilet right inside your compound or a public toilet outside?

Toilet inside on plot = 1

Public toilet outside compound = 2

5.3. Do you pay anything for the use of this toilet?

1 Yes \Rightarrow 5.4

2 No \Rightarrow 5.5

5.4. How much do you pay for the use of this toilet? _____ Naira

Time Unit

Daily =1 Weekly = 2 Monthly = 3 Quarterly = 4 Half-yearly = 5 Yearly = 6

Other, specify time unit _____ =7

5.5 Are you satisfied with your present toilet system?

Yes = 1

No = 2

Thank you for your cooperation

SECTION 6: ACCESS TO INFRASTRUCTURE - WATER

6.1. What is the main water source for your household?

	!	How far from your dwelling (in meters) is this water source? Within 500 meters =1 Between 500 meters to 1 km=2 1 km or more = 3	How many households do you share this source of water with?	
Piped water into dwelling	1			⇒ 6.3.
Piped water to yard/plot	2			⇒ 6.3.
Public tap/standpipe	3			⇒ 6.3.
Tubewell/borehole	4			⇒ 6.2.
Protected dug well	5			⇒ 6.2.
Unprotected dug well	6			⇒ 6.2.
Protected spring	7			⇒ 6.2.
Unprotected spring	8			⇒ 6.2.
Rainwater	9			⇒ 6.2.
Bottled water	10			⇒ 6.2.
Small-scale vendor	11			⇒ 6.2.
Tanker-truck	12			⇒ 6.2.
Surface water (Lagoon, creek, river, dam, lake, pond, stream, canal, irrigation channels)	13			⇒ 6.2.
Other: (i.e. water kiosk, from nearby house, hospital, school...)	14			⇒ 6.2.

6.2 Who usually goes to this source to fetch the water for this household? [Check two maximum.]

Member 1:	
Member 2:	

6.3. Do you experience any of the following problems with your primary water supply?

Poor quality (dirt particles, muddy quality etc)	1
Unexpected interruptions – daily	2
Unexpected interruptions – occasionally	3
Inaccurate billing	4
Too far/inconvenient to fetch	5
Other: specify	6

6.4 What do you usually do to the primary source of water to make it safer to drink? (Click all that apply)

1=Yes 2=No

Boil	
Add bleach/chlorine	
Sieve it through cloth	
Water filter (ceramic, sand, composite, etc.)	
Solar disinfection	
Let it stand and settle	
Do nothing	
Other – specify	

6.5 How much water does your household normally use per day from this primary source?

Est. no. of 10-15 litre bucket	
Est. no. of 20-25 litre Jerry can	

6.6 How much do you normally pay per unit of water from primary source?

Bucket (10-15 litres)	₦
Jerry can / (20-25 litres)	₦

Thank you for your cooperation

6.7 Do you pay or share a regular bill from the Lagos water company?	Yes=1	No=2 ⇒ 6.8
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6.8. How much was your last water bill (only your portion if shared water bill)? ____ Naira Time unit: Daily =1 Weekly = 2 Monthly=3 Quarterly=4 Half-yearly=5 Yearly=5

6.90 Is the primary water source reliable?	Yes	<input type="text" value="1"/>	No	<input type="text" value="2"/>
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6.10 Is the primary water good for drinking?	Yes:	<input type="text" value="1"/>	No	<input type="text" value="2"/>
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6.11 Do you ever buy from a vendor?	Yes=1 ⇒ 6.12	No =2 ⇒ 6.14
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6.12 What type of water vendor: (tick only one)

Private neighborhood tap	<input type="text" value="1"/>
Tankers	<input type="text" value="2"/>
Street/Mobile vendors (water sellers)	<input type="text" value="3"/>
Vendor for LSWC standpipe	<input type="text" value="4"/>
Other (please specify)	<input type="text" value="5"/>

6.13 How much have you paid to a water vendor in the last 2 weeks? N _____

6.14 Do you use any <u>additional</u> water supply sources apart from the main source?	Yes = 1 ⇒6.15	No =2 ⇒ 6.16
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6.15 Please specify this additional source _____

6.16 What group(s), NGO(s), organization(s), network(s), or association(s) dealing with water and sanitation issues do you or any member of your household belong to? Mark all that apply.

Type of organization or group	6.16a 1= Yes ⇒6.16b 2 = No ⇒6.17	6.16b If yes, please write name	6.16c Code of most active household member [enumerator: use code numbers from household roster]	6.16d How actively does this person participate in the group's decision making? 1 = Leader 2 = Very Active 3 = Somewhat Active 4 = Does not participate	6.16e Connection with the organization or group 1 = employee 2 = member 3 = volunteer 4 = other (specify) 5= no connection
A. Water user or water management association					
B. Consumer association					
C. Environment and waste management group					

Thank you for your cooperation

D. Traders, Business Association or Professional Association (water provider association, doctors, teachers)					
E. Trade Union or Labor Union					
F. Neighborhood committee					
G. Health group					
H. Youth group					
I. NGO or civic group					
J. Religious or spiritual group (e.g. church, mosque, temple, informal religious group)					
K. Political group or movement					
L. Finance, credit or savings group					
M. Cultural group or association (e.g. arts, music, theater, film)					
N. Education group (e.g. parent-teacher association, school committee)					
O. Ethnic-based community group					
P. Other groups					

ENUMERATORS: *if respondent is not a member of any group, go to next section.*

6.17 Of all these groups to which you or members of your household belong, which is the one most involved in water and sanitation issues?

Name of group: _____

ENUMERATORS: Remember to only refer to this group in the remaining questions of this section.

6.18 How would you characterize the members in [the group]?

1 Mostly men 2 Mostly women 3 About the same number of men and women
1 Mostly young 2 About the same number of young and adults
1 Same income level as you 2 Higher income level than you 3 Lower income level than you 4 Some higher and some lower

Thank you for your cooperation

income level than you
1 Same education level as you 2 Higher education level than you 3 Lower education level than you
1 Same profession as you 2 Varied professions
1 Physically handicapped 2 Mentally handicapped 3 HIV positive 4 Generally in good health
1 Mostly bachelor 2 Mostly married 3 Mostly widows/ers 4 Mostly divorced 5 Mostly separated
1 Mostly homeless 2 Mostly tenants 3 Mostly owners
Other, Specify _____

6.19 What is the main benefit from joining [the group]?

- 1 Improvement in my household's access to adequate water services
 2 Improvement in my household's access to adequate sanitation services
 3 Important in times of emergency
 4 Benefits the community rainwater drainage
 5 Other (specify) _____

6.20 Have you ever had a problem about your water supply? 1 Yes 2 No

6.21 How did you deal with this problem?

ENUMERATORS: Quote choices only if respondent doesn't name them.

- 1 Reported to [the group]
 2 Directly notified Lagos State Water Corporation
 3 Directly contacted local politician, called him/her, or sent a letter
 4 Directly reported to the local CDA (Community Development Association)
 5 Participated in a protest or demonstration
 6 Directly alerted media
 7 Directly reported to another agency, specify _____
 8 Did nothing

6.22 In the past 12 months, has [the group] done any of the following to solve a water or sanitation problem?

ENUMERATORS: Quote choices only if respondents can not cite any one of the following.

	1 Yes 2 No	Number of times in the last 12 months
A. Attended a neighborhood council meeting, public hearing, or public discussion group		
B. Met with a federal or state politician, called him/her, or sent a letter		
C. Participated in a protest or demonstration		
D. Participated in an information or election campaign		
E. Public statement to a newspaper, radio or TV		
F. Notified Lagos State Water Corporation		
G. Notified Lagos Waste Management Authority		
H. Notified another agency, specify _____		

6.23 Please cite the nature of the complaint starting with the one you feel was most important.

ENUMERATORS: Mark cross to rank three choices

			Number of problems/complaints addressed by the group
			1 = one 2 = two 3 = three to five 4 = more than five 5 = none
1		Pressure	
2		Tariff issue	
3		Billing issue	
4		Water quality issue	
5		Hours of service	
6		Other, specify _____	

Thank you for your cooperation

6.24 Were these problems fixed subsequent to [the group]'s action?

1 Yes 2 No

6.25 Does [the group] have an office/clinic... in this neighbourhood?

1. Yes 2. No

6.26 Has [the group] ever asked your community what activities it should undertake? 1. Yes \Rightarrow 6.27 2. No \Rightarrow 6.28

6.27 How did it go about asking?

- a. Meeting/workshop with community leaders
- b. Meeting/workshop with community residents
- c. Meeting(s) with individuals
- d. Sent letter to community
- e. Sent letter(s) to individuals
- f. Did a survey of community residents
- g. Other, specify.....

6.28 Overall, are you satisfied with the usefulness and effectiveness of [the group] in responding to this neighborhood's residents request for help for better water service delivery?

1 Definitely yes 2 Somewhat yes 3 Indifferent 4 Somewhat no 5 Definitely no

6.29 If there was a water supply or a waste water problem in this community, how likely is it that people will cooperate to try to solve the problem inside or outside of [the group]?

	With [the group]	Without [the group]
1 Very likely		
2 Somewhat likely		
3 Neither likely or unlikely		
4 Somewhat unlikely		
5 Very unlikely		

6.30 Have you ever considered changing to an improved system of water supply?

Yes ☐ 1 No ☐ 2

6.31 If yes, what are your main motives for change?

SECTION 7: ACCESS TO INFRASTRUCTURE - SOLID WASTE REMOVAL

7.1 What is the **most commonly used** mode for disposal of solid waste from this household? (Tick only one)

- Collected by the government house to house
- Unauthorized heap - Dumping ground in neighborhood
- Truck pusher / private refuse collector
- Disposal within compound - Neighborhood bin / tank / skip
- Government bin, specify State or Local Government _____
- Other

1
2
3
4
5
6

7.2. How much do you pay for refuse removal **alone**? _____ Naira

Time unit:

Daily =1 Weekly = 2 Monthly=3 Quarterly=4 Half-yearly=5 Yearly=6, Other time unit, specify _____ = 7

7.3. Are you satisfied with your solid waste disposal?

Yes =1 No = 2

SECTION 8: ACCESS TO INFRASTRUCTURE - ENERGY & ELECTRICITY

8.1. What sources of energy have you used in the past 12 months? Click all that apply

Source	8.1.a. Yes =1 \Rightarrow 8.1.b No=2	8.1b. How much was your last bill?	8.1c. Time unit Daily =1 Weekly = 2 Monthly=3 Quarterly=4	8.1.d. How much did you pay in the last month?

Thank you for your cooperation

			Half-quarterly=5 Yearly=5, Other time unit, specify _____ = 6	_____ Naira
Electricity direct from NEPA				
Electricity from self source, e.g. generator, solar cell				
Electricity through illegal connection				
Candles/Lanterns				
Battery				
Gas				
Paraffin/ Kerosene				
Wood/ Coal				
Other: Specify				

[Enumerator: Ask the following questions only if the respondent has electricity, else go to 8.16]

8.2 What is the average monthly consumption in kWh in various seasons:

	Dry	Wet
KWh		

8.3 Is your electricity consumption metered?

Conventional NEPA meter	1 ⇒ 8.4
Prepaid card	2 ⇒ 8.8
Unmetered	3 ⇒ 8.8

8.4 What is the time lag between meter reading and billing – on the average? _____

8.5 How much time is given for payment of the bills? _____

8.6 How much time is given for delayed payment before disconnection notice? _____

8.7 How do you pay your bills?

Cash = 1	Cheque = 2	Bank = 3	Internet = 4
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8.8 Do you experience any unexpected interruptions in electricity supply?

Yes daily = 1	Yes few times in a week = 2	Yes few times in a month = 3	No = 4
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8.9 Are you satisfied with the electricity supply in this house? Yes = 1 | No = 2 |

8.10 Does this household own any of the following assets and durable consumer goods?

Items	Click if yes	Number of items	Use (number of hours per day)	Wattage
Fan				
Geysor for hot water				
Fridge				
Gas cooker/Hot plate/modern stove				
Air conditioner				
TV				
Computer				
Printer				
Laundry machines				
Dish washers				
Car or truck				
Motorcycle				
Bicycle				
Mattress or bed				
Radio or cassette recorder				
Sewing machine				
Video recorder				

Thank you for your cooperation

Camera				
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8.11 Have you experienced damage to any of your household electrical appliances in the past 36 months due to low voltage / high voltage, or other supply anomalies?

Yes =1	No = 2
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8.12 Estimated value of damage for repairs or replacements.

Naira	
0 - 1,000	1
1,001 - 5,000	2
5,001 - 10,000	3
10,001 - 50,000	4
> 50,000	5

8.13 Do you have any standby source for generation of power?

Yes = 1 ⇒ 8.14	No = 2 ⇒ 8.16
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8.14 Please answer the following about your generator:

Capacity	
Fuel used	
Connected load in kW	

8.15 What is the average hours in the last month do you run the alternate source of power:

	Dry	Wet
Hours in a month		

8.16 Are you willing to buy power from third party (for example, a private provider)? Yes = 1 No = 2

8.17 Are you willing to pay the connection charge of ₦15,000? (single phase)

Yes No

8.18 If you could pay connection charge in monthly installments over a period of a year would you have electricity in your house?

Yes No

SECTION 9: ACCESS TO INFRASTRUCTURE - TELEPHONE

9.1. Where do members of this household use a phone? Yes = 1 No= 2

Personal mobile	
Personal phone (landline)	
Neighbour's phone	
Public phone	
Work phone	
Other phone: specify	
No access to a telephone	⇒ Section 10

9.2. How much do you spend on telephone? _____ Naira

Time Unit

Daily =1 Weekly = 2 Monthly=3 Quarterly=4 Half-yearly=5 Yearly=6, Other time unit, specify _____ = 6

SECTION 10: TRANSPORTATION & LOCAL ROADS

10.1 Is your house accessible by car? Yes No

10.2 Is the road tarred? Yes No

10.3 On average, how long (in minutes) does it take from here to reach according to your usual mode of transportation:

Mins	Your (head of household) place of employment	Your child(ren)'s school	The nearest public transportation point	The nearest Health clinic	Nearest Food market	Nearest Supply of drinking
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Thank you for your cooperation

						water
0-14	1	1	1	1	1	1
15-29	2	2	2	2	2	2
30-44	3	3	3	3	3	3
45-59	4	4	4	4	4	4
60 +	5	5	5	5	5	5

10.4 How many days do you work in a week?

Full time = 1,

3 days or more = 2,

1 or two days = 3

DON'T WORK = 4 ⇒ 10.9

10.5 Where is your place of employment?

Home = 1 (⇒10.9), fixed in the area = 2 (⇒10.7), fixed elsewhere = 3 (⇒10.6), no fixed place but in the area = 4 (⇒10.7), no fixed place elsewhere = 5 (⇒10.7),

10.6 if you employment place is fixed not in the area, what is the precise location of the employment place?

Address:

10.7 What are the modes of transport that you normally use to go to your employment place?

Foot = 1, Okada 2, Danfo-molue-bus-taxi=3, Private car=4, Water transport=5

1st mode = _____

2nd mode= _____

3rd mode= _____

4th mode= _____

5th mode= _____

10.8 how much do you spend on transport to go to your employment place per day? Naira

10.9 How much does your family spend on transport (both children and adults)? _____ Naira

Time Unit

Daily = 1 Weekly = 2 Monthly = 3 Quarterly = 4 Half-quarterly = 5 Yearly = 5, Other time unit, specify _____ = 6

SECTION 11: EDUCATION

11.1. Are there any government schools in this community?

Primary schools	Yes	<input type="text" value="1"/>	N	<input type="text" value="2"/>	Don't Know	<input type="text" value="3"/>
Secondary schools	Yes	<input type="text" value="1"/>	N	<input type="text" value="2"/>	Don't Know	<input type="text" value="3"/>

11.2 Do (did) your children/ wards attend these government schools?

Yes No

11.3 How far is the nearest government primary school from your house? (Meters)

11.4. If any of the schools that your children go to are outside of your immediate neighborhood, explain why:

Not applicable - Children go to schools inside the immediate neighbourhood	1
Quality of education	2
Language	3
Cost	4
Safety	5
Other: please specify	6

11.5. How many children in your household currently attend school?

	Number
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11.6. On average, how much does your household spend on childrens' education per

Thank you for your cooperation

year? (Including school tuition, private tuition, sports and extracurricular activities, uniforms etc)

11.7 Are you satisfied with the services provided by the government school in your community?

Yes = 1 \Rightarrow Section 12

No = 2 \Rightarrow 11.8

11.8. What are the problems at school? *List in order of seriousness.*

	Problems
Too far away/transport problems	1
Too expensive/Fees too high	2
Lack of books and supplies (blackboard, chalk, desk, chair...)	3
Lack of teachers	4
Poor teaching quality	5
Poor school management quality	6
Facilities in bad conditions (buildings, electricity, water...)	7
Crowded classrooms/	8
Safety (violence, drugs...)	9
Other: Specify	10

SECTION 12: HEALTH

12.1 Is there any government clinic in this community? Yes = 1 No = 2

12.2 Do you or anyone in your household use the government clinic? Yes

No

12.3 On average, how much does your household spend on health of members per month?

12.4. In general, how would you describe the quality of the health care services that you received in formal health facilities (government hospital, clinic, private doctor, etc...)?

Excellent	1
Good	2
Satisfactory	3
Bad	4

12.5 Did you face any problems in these health facilities? Yes 1 \Rightarrow 12.6 No 2 \Rightarrow 12.7

12.6. If you faced problems in these facilities, what are those? Click all that apply.	Yes =1 No=2
Unhygienic facilities	
Long waiting time/waitlist	
Too expensive	
Too far	
Treatment unsuccessful	
Insufficient number professionals (doctors, nurses...)	
Low quality of drugs	
No drugs/medicines available	
No appliances available (bed, machinery...)	
Low quality of services	
Other: Specify	

12.7 Have you heard of HIV/AIDS? Yes = 1 \Rightarrow 12.8, No = 2 \Rightarrow Section 13

12.8 Do you know where HIV/AIDS tests are conducted? Yes = 1 No = 2

12.9 Have you been tested for HIV/AIDS? Yes = 1 No = 2

12.10 How do you rate your HIV/AIDS testing facility? Excellent = 1 Good = 2 Satisfactory = 3 Bad = 4

12.11 What is your source of information on AIDS?

Yes = 1, No = 2. Click all that apply.

Thank you for your cooperation

Radio	
TV	
Newspapers	
Posters	
Health workers	
Churches/Mosques	
School/Teachers	
Community meetings	
Friends and/or relatives	
Workplace sensitization/colleagues	
Other, specify ____	

12.12 Have you received any health related training in the last six months? Yes = 1, No= 2, Click all that apply

- (i) Reproductive health (family planning etc.)
- (ii) Hygiene (, (Treatment of dysentery, malaria/mosquito awareness etc.)
- (iii) Childcare
- (iv) HIV/AIDS prevention and care
- (v) Other, specify _____

12.13 Have you or any member of your household missed days of work due to illness in the past month?
Yes = 1 ⇒ 12.14 No= 2 ⇒ 12.15

12.14 How many days in the last year did you or any member of your household missed days of work due to illness? ____
days

12.15 What is the most common health problem in your household? _____

12.16 Why do you think you suffer from these health problems? Yes =1 No= 2 Click all that apply.

- Poor access to water and sanitation
- Poor quality of water and sanitation
- Insufficient knowledge on prevention of diseases
- Poor access to health facilities
- Poor quality of health facilities
- Cannot afford healthcare
- Other, please specify _____

SECTION 13: EMERGENCY AND POLICING SERVICES

13.1 Have you or member of your household been a victim of any crime in the past year?

	Yes= 1 No=2
Crime against your person	
Crime against your property	

13.2. Do you feel you have adequate levels of access to the following services? What is the average response time?

	Yes = 1	No = 2	Average response time? (from 1mn to unlimited)	No access/ Not applicable
Community policing services			Minutes	
Government policing services			Minutes	
Ambulance services			Minutes	
Fire brigade services			Minutes	

13.3. Do you face any of the following major problems in your neighborhood?

1= Very severe 2= Moderately severe 3= Indifferent 4= Not so severe 5= Not severe at all

	Severity scale
Littering	
Public urination	
Land invasion by hawkers	
Illegal trading	
Poor traffic control	

Thank you for your cooperation

Corruption of service delivery officials	
Other: please specify	

SECTION 14: COMMUNITY PREFERENCES

14.1. Which are the three **most important services** you would like the state government or state utility agencies to provide or improve the services for an existing service? Please list them from most important to least important.

Service
1)
2)
3)

14.2 How do you rate the government's performance in delivering public services such as water, electricity, law and order, etc?

	Excellent	Good	Satisfactory	Bad
Federal government				
State government				
Local government				

14.3 Do you experience any of the following problems in your community / neighborhood?

	Yes= 1	No= 2
Poor street lighting		
Dusty/Muddy streets		
Poor drainage/Flooding		

14.4 Indicate whether these services has improved, deteriorated or stayed the same during the past 5 years?

	Improved= 1	Stayed the same=2	Deteriorated= 3
Street lighting			
Streets			
Drainage/Flooding			

14.5 Which of the following facilities do you consider most useful to you?

[Enumerator: read the list to the respondent, then ask to rank the facilities in order of importance. You should put 1 against the most important, 2 against the second most important and 3 against the 3rd, etc.]

Roads
 Drainage
 Street lighting
 Water Supply
 Public toilet
 Laundry
 Heath Centre/Hospital and clinics
 School
 Waste disposal
 Recreational facilities
 Post office
 Telephone
 Market
 Fire station
 Police station
 Any other (please specify)

14.6 Should the community participate in the management of the facilities? Click all that apply.

	Yes	No
Roads	1	2
Drainage	1	2
Laundry	1	2
Street lighting	1	2

Thank you for your cooperation

Water Supply
Public toilet
Health Centre/Hospital and clinics
School
Waste disposal
Recreational facilities
Post Office
Telephone
Market
Any other

1	2
1	2
1	2
1	2
1	2
1	2
1	2
1	2
1	2
1	2

14.7 Would you be willing to participate in any way in operation and maintenance of any of the facilities? Click all that apply.

	Yes	No
Roads	1	2
Drainage	1	2
Street lighting	1	2
Water Supply	1	2
Public toilet	1	2
Laundry	1	2
Health Centre/Hospital and clinics	1	2
School	1	2
Waste disposal	1	2
Recreational facilities	1	2
Post Office	1	2
Telephone	1	2
Market	1	2
Any other	1	2

Payment of user fees:

14.8 Which services do you pay for currently? Click all that apply.

	Pay	Don't Pay
Roads	1	2
Drainage	1	2
Street lighting	1	2
Water Supply	1	2
Public toilet	1	2
Laundry		
Health Centre/Hospital and clinics	1	2
School	1	2
Waste disposal	1	2
Recreational facilities	1	2
Post Office	1	2
Telephone	1	2
Market	1	2
Any other	1	2

14.9 Who **should** collect the payment for these services?

1= Community, 2=Local Government, 3= State Government, 4= Private Provider, 5= Other (Specify)

Roads
Drainage
Street lighting
Water Supply
Public toilet
Laundry
Health Centre/Hospital and clinics
School

Thank you for your cooperation

Waste disposal
Recreational facilities
Post office
Telephone
Markets

14.10 How would you like to contribute to operation and maintenance of these public services?

Labour Cash Both cash and labour

14.11 If these improvements result in increases in rents/rates in this area, would you still stay in this community?

Yes No

SECTION 15: HOUSEHOLD INCOME AND EXPENDITURE

[Enumerator: The answers given here should include spending by all household members]

15.1. What is your average monthly expenditure (in Naira)

Below 1369	1
1369 - 2138	2
2139 - 3074	3
3075 - 4683	4
Above 4684	5

15.2. What is the average total income of this household per month?

15.3. Do you receive remittances from abroad/overseas?

15.4 How do you receive the remittances?

Channels	1=Yes 2=No	Average monetary amount
Formal channels - through Banks, Western Union etc		
Informal channels - through friends traveling etc		
Both formal and informal channels		
Other, please specify ____		

15.5. Do you send money to your household/relatives?

15.6. Where do you send money?

Channels	1=Yes 2=No	Specify
Inside Lagos		
Inside Nigeria, specify state ____		
Outside Nigeria, specify country ____		
Other, please specify ____		

FOR ENUMERATORS ONLY

Do you feel that the respondent made an effort to tell the truth?

Yes No

Were any other people present during the interview?

Yes No

If yes, how many?

How would you characterise the communication between yourself and the respondent:

Poor Fair Good

Thank you for your cooperation