

CONFIDENTIAL

POST-PLANTING



Federal Republic of Nigeria
National Bureau of Statistics Abuja, Nigeria

**GENERAL HOUSEHOLD SURVEY-PANEL
Wave 3 (2015/16) Post-Planting Visit
Household Questionnaire Conflict**



THIS INFORMATION IS STRICTLY CONFIDENTIAL AND IS TO BE USED FOR STATISTICAL PURPOSES ONLY.

SECTION A-1: HOUSEHOLD IDENTIFICATION

INDICATE THE PLACE OF THIS QUESTIONNAIRE IN THE SET OF QUESTIONNAIRES COMPLETED FOR THIS HOUSEHOLD
QUESTIONNAIRE ____ OF ____ TOTAL

	Name	Code
1. Zone	_____	<input type="text"/>
2. STATE:	_____	<input type="text"/> <input type="text"/>
3. LGA	_____	<input type="text"/> <input type="text"/>
4. SECTOR (Urban=1, Rural=2)	<input type="text"/>	
5. EA	_____	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
6. RIC	_____	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
7. HOUSEHOLD NO.	<input type="text"/> <input type="text"/> <input type="text"/>	

AG1. Did a member of this household practice any agricultural activity such as crop, livestock or fish farming YES.....1
NO.....2

AG2. Does a member of this household own land that was not cultivated YES.....1
NO.....2

AG3. AGRICULTURE QUESTIONNAIRE REQUIRED? YES.....1
NO.....2

8. WHAT ARE THE GPS COORDINATES OF THE DWELLING?

LATITUDE (N)							LONGITUDE (E)						
_	_	°	_	_	.	_	_	_	°	_	_	.	_

9. NAME OF HOUSEHOLD HEAD: _____

10. ADDRESS OF HOUSEHOLD HEAD:

11. NAME OF INTERVIEWER: _____

12. NAME OF SUPERVISOR: _____

[DAY / MONTH / YEAR]

13. DATE OF FIRST INTERVIEW: / /

14a. TIME FIRST INTERVIEW STARTED :

14b. TIME FIRST INTERVIEW ENDED :

15a. INTERVIEW STATUS AFTER 1st VISIT:

COVER	Section 4A SAVINGS AND INSURANCE	Section 4B ICT - MOBILE PHONE BANKING	Section 4C CREDIT	Section 5 HOUSEHOLD ASSETS	Section 9b SUBJECTIVE WELLBEING	Section 11 HOUSING
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

15b. DATA ENTRY STATUS AFTER FIRST VISIT:

- 1-COMplete, NO QUESTIONNAIRE ERRORS
 2-COMplete, WITH QUESTIONNAIRE ERRORS
 3-NOT COMPLETE

[DAY / MONTH / YEAR]

16. DATE OF SECOND INTERVIEW: / /

17a. TIME SECOND INTERVIEW STARTED :

17b. TIME SECOND INTERVIEW ENDED :

18a. INTERVIEW STATUS AFTER 2nd VISIT:

COVER	Section 4A SAVINGS AND INSURANCE	Section 4B ICT - MOBILE PHONE BANKING	Section 4C CREDIT	Section 5 HOUSEHOLD ASSETS	Section 9b SUBJECTIVE WELLBEING	Section 11 HOUSING
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

18b. DATA ENTRY STATUS AFTER SECOND VISIT:

- 1-COMplete, NO QUESTIONNAIRE ERRORS
 2-COMplete, WITH QUESTIONNAIRE ERRORS
 3-NOT COMPLETE

[DAY / MONTH / YEAR]

19. DATE OF THIRD INTERVIEW: / /

20a. TIME THIRD INTERVIEW STARTED :

20b. TIME THIRD INTERVIEW ENDED :

21a. INTERVIEW STATUS AFTER 3rd VISIT:

COVER	Section 4A SAVINGS AND INSURANCE	Section 4B ICT - MOBILE PHONE BANKING	Section 4C CREDIT	Section 5 HOUSEHOLD ASSETS	Section 9b SUBJECTIVE WELLBEING	Section 11 HOUSING
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

21b. DATA ENTRY STATUS AFTER THIRD VISIT:

- 1-COMplete, NO QUESTIONNAIRE ERRORS
 2-COMplete, WITH QUESTIONNAIRE ERRORS
 3-NOT COMPLETE

OBSERVATIONS ON THE INTERVIEW

RECORD GENERAL NOTES ABOUT THE INTERVIEW AND RECORD ANY SPECIAL INFORMATION THAT WILL BE HELPFUL FOR SUPERVISORS AND THE ANALYSIS OF THIS QUESTIONNAIRE.

-----THIS SECTION TO BE COMPLETED BY SUPERVISOR-----

1. STATUS OF QUESTIONNAIRE

2. STATUS OF DATA ENTRY

Response Status
1. Completed
2. Partially completed
3. Not at Home
4. Refused
5. Household not located
6. Moved away
7. Other (specify) _____

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DEFINITIONS/INSTRUCTIONS

BRIEF DEFINITION OF A HOUSEHOLD:

1. A household is a group of people who have usually slept in the same dwelling and share their meals together. Examples of households are:

A household consisting of a man and his wife/wives and children, father/mother, nephew and other relatives.

A household consisting of a single person

A household consisting of a couple or several couples with or without children.

2. All listed persons that have been away from the household for more than six months are not considered to be household members except:

The person identified as the head of household even if he or she has not been with the household for more than 6 months

Newly born children (or newly adopted)

Students and seasonal workers who have not been living in or as part of another household

New spouses

FOR EVERY HOUSEHOLD THAT WAS INTERVIEWED BEFORE AND IS STILL RESIDENT IN THE SAME EA/COMMUNITY, FILL OUT A TI (TRACKING FORM 1) BEFORE CONTINUING WITH THE NEXT HOUSEHOLD.

SECTION 4A: SAVINGS AND INSURANCE

ASK THESE QUESTIONS FROM ALL INDIVIDUALS 15 YEARS AND ABOVE.

INDIVIDUAL	1a.	1.	2.			3.	4.	5.	6.
	IS THIS HOUSEHOLD MEMBER 15 YEARS OR OLDER?	Some people like to keep their money in an account at a bank. Do you have a bank account?	In which bank(s) do you have your account(s)? IF THE HOUSEHOLD MEMBERS HAVE BANK ACCOUNTS IN MORE THAN THREE BANKS, ASK FOR THE THREE BANKS THAT THEY USED THE MOST. BANK CODES ACCESS BANK.....01 SKYE BANK.....16 DIAMOND BANK.....03 SPRING BANK PLC.....17 ECOBANK.....04 STANBIC BANK.....18 FCMB.....06 STANDARD CHARTERED BANK..19 FIDELITY BANK.....07 STERLING BANK.....20 FIRST BANK.....08 UBA.....21 GTB.....10 UNION BANK.....22 UNITY BANK.....23 WEMA BANK.....24 ZENITH BANK.....25 KEYSTONE BANK.....26 MAINSTREAM BANK.....27			Before you got this bank(s) account(s), did you search for information from a range of sources?	Did you consider many alternatives before you decided which bank(s) account(s) to get?	Did you check the detailed terms and conditions of the bank(s) account(s) before you got it?	Did you check the detailed terms and conditions of the bank(s) account(s) carefully or just to get a rough idea of what they were?
	YES..1 NO...2 (▶ NEXT SECTION)	YES..1 NO...2 (▶ Q7)	BANK 1 CODE	BANK 2 CODE	BANK 3 CODE	YES..1 NO...2	YES..1 NO...2	YES..1 NO...2 (▶ Q7)	CHECKED CAREFULLY.....1 CHECKED TO HAVE A ROUGH IDEA.....2
1									
2									
3									
4									
5									
6									
7									
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10									
11									
12									

SECTION 4A: SAVINGS AND INSURANCE

INDIVIDUAL	7. Is there someone who lets you cash cheques, transfer funds, or do other banking transactions using their account?	8. Now think of all the ways that you save money, in other words, where you put money to use later. In the last 12 months, have you used a cooperative, savings association or micro-finance institution to save money?	9. Apart from banks, what type of the financial institution(s) such as cooperative society (ies), savings association (s), or micro-finance institution (s) that you used to save money in the last 12 months? (LIST UP TO THREE) INSTITUTION TYPE CODE COOPERATIVE SOCIETY...1 SAVINGS ASSOCIATION...2 MICRO-FINANCE.....3			10. Have you used any informal savings groups (adashi/esusu/ajo) to save money in the past 12 months?	11. to 15. R E P L A C E D	16. Some people insure themselves and their possessions against unexpected circumstances. Have you used any institution to insure yourselves (life, health) or property (household goods, house, vehicle and the like) in the past 12 months?
	YES..1 NO...2	YES..1 NO...2 (▶ Q10)	TYPE 1	TYPE 2	TYPE 3	YES..1 NO...2		YES..1 NO...2 (▶ NEXT SECTION)
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								

SECTION 4A: SAVINGS AND INSURANCE

I N D I V I D U A L I D	17.	17a.	What is (are) the name(s) of the institution(s) that you have used to insure yourselves (life, health) or your property (household goods, house, vehicle and the like) in the past 12 months? IF YOU HAVE MORE THAN THREE INSTITUTIONS, WRITE IN THE CODES OF THE THREE MOST IMPORTANT INSTITUTIONS IN THE SPACES BELOW AND INDICATE THE INSURANCE TYPE IN EACH CASE. IF THERE ARE MULTIPLE INSURANCE TYPES, WRITE ALL SEPARATED BY COMMAS					
			INSURANCE COMPANIES CODE					
			ADIC INSURANCE.....1 AFRICAN ALLIANCE INSURANCE.....2 AIICO INSURANCE.....3 ALLIANCE & GENERAL INSURANCE.....4 ANCHOR INSURANCE.....5 CAPITAL EXPRESS INSURANCE.....6 CONSOLIDATED HALLMARK INSURANCE.....7 CONTINENTAL REINSURANCE.....8 CORNERSTONE INSURANCE.....9 CRUSADER INSURANCE.....10 EQUITY INDEMNITY INSURANCE.....11 EQUITY LIFE INSURANCE PLC.....12 FORTUNE ASSURANCE COMPANY.....13 GOLDLINK INSURANCE.....14 GREAT NIGERIA INSURANCE.....15 GUARANTY TRUST ASSURANCE.....16 GUARDIAN EXPRESS ASSURANCE.....17 GUINEA INSURANCE.....18 INDUSTRIAL AND GENERAL INSURANCE.....19 INTERCONTINENTAL WAPIC INSURANCE.....20 INTERNATIONAL ENERGY INSURANCE.....21 INVESTMENT & ALLIED ASSURANCE.....22	CAPITAL INSURANCE COMPANY.....23 LASACO ASSURANCE PLC.....24 LAW UNION AND ROCK INSURANCE.....25 LEADWAY ASSURANCE.....26 LINKAGE ASSURANCE.....27 MUTUAL BENEFIT ASSURANCE.....28 NEM INSURANCE.....29 NIGER INSURANCE.....30 NIGERIAN AGRICULTURAL INSURANCE CORP.....31 OASIS INSURANCE.....32 OCEANIC INSURANCE.....33 PRESTIGE ASSURANCE.....34 REGENCY ALLIANCE INSURANCE.....35 ROYAL EXCHANGE ASSURANCE.....36 ROYAL PRUDENTIAL ASSURANCE.....37 SOVEREIGN TRUST ASSURANCE.....38 STANDARD LIFE ASSURANCE.....39 STANDARD TRUST ASSURANCE (STACO).....40 STERLING ASSURANCE NIGERIA.....41 YANKARI INSURANCE.....42 ZENITH GENERAL INSURANCE.....43 OTHER.....44				
					INSURANCE TYPE HEALTH.....1 LIFE.....2 PROPERTY.....3 MOTOR VEHICLE.....4 OTHER SPECIFY.....5			
			INSURANCE COMPANY 1 (CODE)	INSURANCE 1 TYPE	INSURANCE COMPANY 2 (CODE)	INSURANCE 2 TYPE	INSURANCE COMPANY 3 (CODE)	INSURANCE 3 TYPE
	1							
	2							
	3							
	4							
	5							
6								
7								
8								
9								
10								
11								
12								

RESPONDENTS 10 YEARS OLD AND OLDER SHOULD RESPOND IN THIS SECTION

INDIVIDUAL ID	1.	1a.	2.	3.	4.	5.	6.	7.	8.	9.	10.	10b.
	IS THIS PERSON TEN YEARS OLD OR OLDER?	D R O P P E D	D R O P P E D	D R O P P E D	D R O P P E D	D R O P P E D	D R O P P E D	D R O P P E D	Do you have access to a mobile phone?	What is your main source of access to a mobile phone? IF OPTIONS 2 - 6 ▶ Q10b OWN.....1 FAMILY MEMBER....2 FRIEND/NEIGHBOR..3 UMBRELLA CENTRE.....4 WORKPLACE.....5 BUSINESS CENTRE.....6 OTHER (SPECIFY).....7	How many mobile phones do you own?	Do you perform any banking activity (e.g. paying bills, transferring money, checking bank accounts, etc.) using a mobile phone?
	YES..1 NO...2 (▶ NEXT PERSON)								YES..1 NO...2 (▶ NEXTPERSON)		NUMBER	YES..1 NO...2 (▶ Q10h)

1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												

SECTION 4B: ICT - MOBILE PHONE BANKING

INDIVIDUAL	10c.	10d.	10e.	10f.	10g.	10h.	11.	12.	13.
	What banking activities do you use mobile phone for?				How often do you use mobile phone for banking activity?	Did you use your mobile phone to receive e-wallet fertilizer and improved seed information?			
					DAILY.....1 ONCE A WEEK.....2 BIWEEKLY.....3 ONCE A MONTH.....4 OTHER (SPECIFY).....5				
	PAYING UTILITY BILLS	TRANSFERRING MONEY TO ANOTHER ACCOUNT/INDIVIDUAL	CHECKING BANK ACCOUNTS	BUYING PHONE CREDIT		YES..1 NO...2			
YES..1	YES..1	YES..1	YES..1						
NO...2	NO...2	NO...2	NO...2						

1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								

I N D I V I D U A L I D	14.	15.	15a			16. to 35.
	Do you have access to the internet?	What is your main source of access to the internet?	What do you use the internet for?			D R O P P E D
	YES..1 NO...2 (▶ NEXT PERSON)	SUBSCRIPTION.....1 FAMILY MEMBER/FRIEND/ NEIGHBOR.....2 UMBRELLA CENTRE.....3 WORKPLACE.....4 BUSINESS CENTRE.....5 OTHER (SPECIFY).....6	LIST (UP TO) 3 OF THE MOST COMMON USES TO SEND/RECEIVE EMAIL....1 FOR EDUCATION/LEARNING ACTIVITIES.....2 TO POST INFORMATION OR INSTANT MESSAGE.....3 TO READ/DOWNLOAD NEWSPAPERS, MAGAZINES, OR BOOKS.....4 TO GET INFORMATION ABOUT GOVERNMENT ORGS.....5 TO DOWNLOAD MOVIES, IMAGES, OR MUSIC.....6 TO ACCESS/MONITOR BANKING SERVICES.....7 OTHER (SPECIFY).....8			
			USE 1	USE 2	USE 3	

1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						

SECTION 4C: CREDIT

PLEASE CLOSE FLAP A

1. Many people borrow money or buy things on credit. In the last 12 months, have you or anyone else in the household borrowed money or applied for a loan from sources such as banks, cooperative societies, savings associations, micro-finance institutions, money lenders etc?

YES....1
 NO....2 ►Q12

LOANS RECEIVED AND LOANS PENDING

L O A N I D	2.	3.			4.	5.	6.
	What are the names of the persons or institutions from whom you or anyone else in your household borrowed money or applied for a loan over the past 12 months? LIST ALL NAMES AND TYPE BEFORE GOING TO THE NEXT QUESTION.	Which household member(s) was(were) responsible for [LOAN] or the application for [LOAN]? LIST UP TO 3 FROM HOUSEHOLD ROSTER			What was the <u>main reason</u> for applying for [LOAN]? PURCHASE LAND.....1 PURCHASE AGRICULTURAL INPUTS FOR FOOD CROP....2 PURCHASE INPUTS FOR CASH CROP.....3 BUSINESS START-UP CAPITAL.....4 NON FARM BUSINESS COSTS..5 CEREMONIES (MARRIAGE, BURIAL, OTHER SOCIAL FUNCTIONS ETC).....6 EDUCATION.....7 MOTOR VEHICLE PURCHASE...8 HOME PURCHASE OR CONSTRUCTION.....9 OTHER HOUSEHOLD CONSUMPTION.....10 OTHER (SPECIFY).....11	Have you already received [LOAN] or is a decision on the application for [LOAN] pending? LOAN RECEIVED..1 LOAN PENDING...2 (►NEXT LOAN/NEXT SECTION)	How much was borrowed under [LOAN]?
	LENDER TYPE CODE COOPERATIVE SOCIETY..1 SAVINGS ASSOCIATION...2 MICRO FINANCE.....3 BANK.....4 ADASHI/ESUSU/AJO.....5 FRIENDS & RELATIVES..6 MONEY LENDERS.....7 HIRE PURCHASE.....8 OTHER.....9	ID CODE # 1	ID CODE # 2	ID CODE # 3			NAIRA
	LENDOR NAME	TYPE CODE					
1							
2							
3							
4							
5							
6							
7							
8							

SECTION 4C: CREDIT

L O A N I D	7. Was the amount of [LOAN] sufficient to cover the purpose (GIVEN IN Q4)?	8. When did you get [LOAN] (within the past 12 months)?		9. Has [LOAN] already been fully repaid?	10. Approximately when do you expect to make final payment on [LOAN)?		11. At completion of repayment of [LOAN], what is the total amount you expect to repay? (INTEREST + PRINCIPAL)
	YES..1 NO...2	<p style="text-align: center;">MONTH CODE</p> <p>JAN..01 FEB..02 MAR..03 APR..04 MAY..05 JUN..06 JUL..07 AUG..08 SEP..09 OCT..10 NOV..11 DEC..12</p>		YES..1 (► Q11) NO...2	<p style="text-align: center;">MONTH CODE</p> <p>JAN..01 FEB..02 MAR..03 APR..04 MAY..05 JUN..06 JUL..07 AUG..08 SEP..09 OCT..10 NOV..11 DEC..12</p>		(INTERVIEWER, HELP RESPONDENT ESTIMATE THIS) ► NEXT LOAN OR IF NO MORE LOANS, NEXT SECTION
		MONTH (MM)	YEAR (YYYY)		MONTH (MM)	YEAR (YYYY)	NAIRA
1							
2							
3							
4							
5							
6							
7							
8							

SECTION 4C: CREDIT

LOAN REFUSALS				NO LOAN ATTEMPTS			
12.	13.	14.	15.	16.	17.		
Did you try to borrow money from any source during the last 12 months but all your attempts were refused or turned down?	What was the <u>main</u> reason for trying to obtain the loan? PURCHASE LAND.....1 PURCHASE AGRICULTURAL INPUTS FOR FOOD CROP....2 PURCHASE INPUTS FOR CASH CROP.....3 BUSINESS START-UP CAPITAL.....4 NON FARM BUSINESS COSTS..5 CEREMONIES (MARRIAGE,BURIAL, OTHER SOCIAL FUNCTIONS ETC)....6 EDUCATION.....7 MOTOR VEHICLE PURCHASE...8 HOME PURCHASE OR CONSTRUCTION.....9 OTHER HOUSEHOLD CONSUMPTION.....10 OTHER (SPECIFY).....11	Who turned you down? IF MORE THAN ONE ATTEMPT, REFER TO THE TWO MOST RECENT ATTEMPTS RELATIVE.....1 NEIGHBOR.....2 GROCERY/LOCAL MERCHANT..3 MONEY LENDER.....4 EMPLOYER.....5 RELIGIOUS INSTITUTION6..6 COOPERATIVE SOCIETY.....7 SAVINGS ASSOCIATION.....8 MICRO FINANCE.....9 BANK.....10 NGO.....11 OTHER (SPECIFY).....12	What were the two main reasons why your loan application was refused? LACK OF COLLATERAL.....1 NO SAVINGS / SHARES....2 BAD CREDIT HISTORY.....3 ITEMS DIDNT QUALIFY FOR A LOAN.....4 LACK OF GUARANTORS.....5 OTHER (SPECIFY).....6 ▶ NEXT SECTION	Did you have need of a loan in the last 12 months?	Why did you not attempt to borrow in the last 12 months? [LIST UP TO TWO ANSWERS IN ORDER OF IMPORTANCE] BELIEVED IT WOULD BE REFUSED.....1 TOO EXPENSIVE.....2 TOO MUCH TROUBLE FOR WHAT IT WAS WORTH.....3 INADEQUATE COLLATERAL..4 DO NOT LIKE TO BE IN DEBT.....6 DO NOT KNOW ANY LENDER.7 OTHER (SPECIFY).....8	YES..1 NO...2 (▶ Q16)	YES..1 NO...2 (▶ NEXT SECTION)
		1ST	2ND	1ST	2ND	1ST	2ND

SECTION 5: HOUSEHOLD ASSETS

DATA ENTRY LINE NUMBER	ITEM CODE	ITEM	1.	2.		3.	4.	DATA ENTRY LINE NUMBER
			How many of the following items does your household own? WRITE THE TOTAL NUMBER OF ITEMS THAT THE HOUSEHOLD POSSESSES. IF NONE PUT '0'	Who is the person that owns this item? WRITE THE ID OF THE PERSON WHO OWNS THE ITEM. IF THE ITEM IS OWNED BY THE HOUSEHOLD IN COMMON, WRITE "98".		How long ago was [ITEM] acquired? (IF LESS THAN ONE YEAR, PUT '0') IF MORE THAN ONE, REFER TO NEWEST	If you wanted to sell one of this [ITEM] today, how much would you receive? IF MORE THAN ONE, REFER TO NEWEST	
			NUMBER OF ITEMS	ID CODE	ID CODE	NUMBER OF YEARS	NAIRA	
1	301	Furniture (3/4 piece sofa set)						1
2	302	Furniture (chairs)						2
3	303	Furniture (table)						3
4	304	Mattress						4
5	305	Bed						5
6	306	Mat						6
7	307	Sewing machine						7
8	308	Gas cooker						8
9	309	Stove (electric)						9
10	310	Stove gas (table)						10
11	311	Stove (kerosene)						11
12	312	Fridge						12
13	313	Freezer						13
14	314	Air conditioner						14
15	315	Washing Machine						15
16	316	Electric Clothes Dryer						16
17	317	Bicycle						17
18	318	Motorbike						18
19	319	Cars and other vehicles						19
20	320	Generator						20
21	321	Fan						21

SECTION 5: HOUSEHOLD ASSETS

DATA ENTRY LINE NUMBER	ITEM CODE	ITEM	1.	2.		3.	4.	DATA ENTRY LINE NUMBER
			How many of the following items does your household own? WRITE THE TOTAL NUMBER OF ITEMS THAT THE HOUSEHOLD POSSESSES. IF NONE PUT '0'	Who is the person that owns this item? WRITE THE ID OF THE PERSON WHO OWNS THE ITEM. IF THE ITEM IS OWNED BY THE HOUSEHOLD IN COMMON, WRITE "98".		How long ago was [ITEM] acquired? (IF LESS THAN ONE YEAR, PUT '0') IF MORE THAN ONE, REFER TO NEWEST	If you wanted to sell one of this [ITEM] today, how much would you receive? IF MORE THAN ONE, REFER TO NEWEST	
			NUMBER OF ITEMS	ID CODE	ID CODE	NUMBER OF YEARS	NAIRA	
22	322	Radio						22
23	323	Cassette recorder						23
24	324	Hi-Fi (Sound System)						24
25	325	Microwave						25
26	326	Iron						26
27	327	TV Set						27
28	328	Computer						28
29	329	DVD Player						29
30	330	Satellite Dish						30
31	331	Musical Instrument						31
32	332	Mobile Phone						32
33	333	Inverter						33
34	3341	Other (Specify):						34
35	3342	Other (Specify):						35
36	3343	Other (Specify):						36
37	3344	Other (Specify):						37
38	3345	Other (Specify):						38
39	3346	Other (Specify):						39
40	3347	Other (Specify):						40
41	3348	Other (Specify):						41

SECTION 9B: SUBJECTIVE WELLBEING

[ASK SENIOR FEMALE OR PERSON MOST KNOWLEDGABLE ABOUT FOOD CONSUMPTION]

Now I would like to ask you some questions about your food consumption. During the last 12 MONTHS, was there a time when [...]?

1.	2.	3.	4.	5.	6.
INTERVIEWER: RECORD INDIVIDUAL ID OF HOUSEHOLD MEMBER ANSWERING THIS SECTION	. . . you were worried you would not have enough food to eat because of a lack of money or other resources?	. . . you were unable to eat healthy and nutritious food because of a lack of money or other resources?	. . . you ate only a few kinds of foods because of a lack of money or other resources?	. . . you had to skip a meal because there was not enough money or other resources to get food?	. . . you ate less than you thought you should because of a lack of money or other resources?
COPY INDIVIDUAL ID CODE FROM ROSTER	YES..1 NO...2	YES..1 NO...2	YES..1 NO...2	YES..1 NO...2	YES..1 NO...2
ID CODE					

7.	8.	9.	10.	11.	12.
. . . your household ran out of food because of a lack of money or other resources?	. . . you were hungry but did not eat because there was not enough money or other resources for food?	. . . you went without eating for a whole day because of a lack of money or other resources?	Are there any children younger than 5 years old currently living in your household?	During the last 12 MONTHS, was there a time when any of the children younger than 5 years old did not eat healthy and nutritious food because of a lack of money or other resources?	During the last 12 MONTHS, was there a time when any of the children younger than 5 years old was hungry but did not eat because there was not enough money or other resources for food?
YES..1 NO...2	YES..1 NO...2	YES..1 NO...2	YES..1 NO...2 (► NEXT SECTION)	YES..1 NO...2	YES..1 NO...2

SECTION 11: HOUSING

SECTION 8A - HOUSING

<p>1. Do you own or purchase this dwelling, is it provided to you by an employer, do you use it for free, or do you rent this house?</p> <p>OWNED.....1 EMPLOYER PROVIDES....2 (▶Q3) FREE, AUTHORIZED.....3 (▶Q3) FREE, NOT AUTHORIZED.4 (▶Q3) RENTED5 (▶Q4)</p>	<p>2. If you <u>sold this dwelling</u> today, how much would you receive for it?</p>	<p>3. Estimate the rent you could receive if you rented this dwelling?</p> <p>(▶Q5)</p>	<p>4. How much do you <u>pay to rent</u> this dwelling?</p>	<p>5. In what year was this house built?</p> <p>IF DON'T KNOW, WRITE 9999</p>	<p>6. THE <u>OUTER WALLS</u> OF THE MAIN DWELLING OF THE HOUSEHOLD ARE PREDOMINANTLY MADE OF WHAT MATERIAL?</p> <p>GRASS.....01 MUD.....02 COMPACTED EARTH...03 MUD BRICK (UNFIRED)04 BURNT BRICKS....05 CONCRETE.....06 WOOD.....07 IRON SHEETS08 CONCRETE OR CEMENT BLOCKS.....09 STONE.....10 OTHER (SPECIFY) ...11</p>	
	NAIRA	NAIRA	TIME UNIT	NAIRA	TIME UNIT	YEAR

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<p>7. THE <u>ROOF</u> OF THE MAIN DWELLING IS PREDOMINANTLY MADE OF WHAT MATERIAL?</p> <p>GRASS.....1 IRON SHEETS....2 CLAY TILES.....3 CONCRETE....4 PLASTIC SHEET.....5 ASBESTOS SHEET.....6 OTHER (SPECIFY) ...7</p>	<p>8. THE <u>FLOOR</u> OF THE MAIN DWELLING IS PREDOMINANTLY MADE OF WHAT MATERIAL?</p> <p>SAND/DIRT/ STRAW.....1 SMOOTHED MUD...2 SMOOTH CEMENT...3 WOOD.....4 TILE.....5 OTHER (SPECIFY) .6</p>	<p>9. How many <u>separate rooms</u> do the members of your household occupy? (DO NOT COUNT BATHROOMS, TOILETS, STOREROOMS, OR GARAGE)</p> <p style="text-align: center;">NUMBER OF ROOMS</p>	<p>10. What is your main source of <u>lighting fuel</u>?</p> <p>COLLECTED FIREWOOD.....1 PURCHASED FIREWOOD.....2 GRASS.....3 KEROSENE.....4 PHCN ELECTRICITY .5 GENERATOR.....6 GAS.....7 BATTERY/DRY CELL (TORCH) .8 CANDLES.....9 OTHER (SPECIFY) ...10</p>	<p>11. What is your main source of <u>cooking fuel</u>?</p> <p>COLLECTED FIREWOOD.....1 PURCHASED FIREWOOD.....2 COAL.....3 GRASS.....4 KEROSENE.....5 PHCN ELECTRICITY...6 GENERATOR.....7 GAS.....8 OTHER (SPECIFY)9</p>	<p>12. Do you ever <u>collect firewood</u>?</p> <p>YES..1 NO...2 (▶Q15)</p>	<p>13. Where do you go to collect firewood?</p> <p>OWN WOODLOT.....1 COMMUNITY WOODLOT.....2 FOREST RESERVE.....3 UNFARMED AREAS OF COMMUNITY.....4 OTHER (SPECIFY).....5</p>	<p>14. How long does it take you to walk from your dwelling to where you usually go to collect firewood? (ONE WAY)</p> <p>MINUTE..1 HOUR....2</p> <p style="text-align: center;">TIME</p>	<p>15. Of the firewood you used in the past week, how much of it did you purchase?</p> <p>DID NOT USE FIREWOOD.....1 (▶Q17b) ALL2 ALMOST ALL....3 MORE THAN HALF4 HALF5 LESS THAN HALF6 A LITTLE.....7 NONE.....8</p> <p style="text-align: center;">UNIT</p>
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SECTION 11: HOUSING

16.	17.	17b.	18.	19.	19b.	19c.	20.	21.	22.	23.																
What is the total value of the firewood you used in the past week, whether gathered or purchased? (Estimate purchase cost of gathered firewood.)	D R O P P E D	Is this dwelling connected to the public/community electricity system?	In the event of a black out, what source of energy do you use for ...? <table border="0"> <tr> <td><u>Lighting</u></td> <td><u>Cooking</u></td> </tr> <tr> <td>FIREWOOD.....1</td> <td>CHARCOAL.....1</td> </tr> <tr> <td>KEROSENE.....2</td> <td>FIREWOOD.....2</td> </tr> <tr> <td>RECHARGEABLE LAMP.....3</td> <td>GAS.....3</td> </tr> <tr> <td>GENERATOR.....4</td> <td>KEROSENE.....4</td> </tr> <tr> <td>CANDLES.....5</td> <td>GENERATOR.....5</td> </tr> <tr> <td>BATTERY/DRY CELL (TORCH)...6</td> <td>OTHER SPECIFY).....6</td> </tr> <tr> <td>OTHER (SPECIFY)...7</td> <td></td> </tr> </table>	<u>Lighting</u>	<u>Cooking</u>	FIREWOOD.....1	CHARCOAL.....1	KEROSENE.....2	FIREWOOD.....2	RECHARGEABLE LAMP.....3	GAS.....3	GENERATOR.....4	KEROSENE.....4	CANDLES.....5	GENERATOR.....5	BATTERY/DRY CELL (TORCH)...6	OTHER SPECIFY).....6	OTHER (SPECIFY)...7		D R O P P E D	What is the main source of your electricity supply? PHCN (NEPA) ONLY..1 RURAL ELECT-RIFICATION.....2 (►Q20)	Do you have a pre-paid meter?	Did you have to apply to get electricity connection?	Following your application to get connected to PHCN, how many weeks did you have to wait for a Technician to come to connect your house?	Did you have to pay an unofficial fee to get a connection?	How frequently do you experience blackouts in your area? NEVER.....1 EVERY DAY....2 SEVERAL TIMES A WEEK.....3 SEVERAL TIMES A MONTH.....4 SEVERAL TIMES A YEAR.....5
<u>Lighting</u>	<u>Cooking</u>																									
FIREWOOD.....1	CHARCOAL.....1																									
KEROSENE.....2	FIREWOOD.....2																									
RECHARGEABLE LAMP.....3	GAS.....3																									
GENERATOR.....4	KEROSENE.....4																									
CANDLES.....5	GENERATOR.....5																									
BATTERY/DRY CELL (TORCH)...6	OTHER SPECIFY).....6																									
OTHER (SPECIFY)...7																										
NAIRA		YES..1 NO...2 (► Q26)			YES..1 NO...2	YES..1 NO...2 (► Q23)	WEEKS	YES..1 NO...2																		

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24.	25	26.	27.	28.	28b.
During the last 7 days, on average, how many hours of electricity has your household had from the main public system?	What was the total cost for electricity in the household ? What period does this cost refer? DAY.....1 WEEK.....2 MONTH.....3 YEAR.....4 (►Q28b)	Although you do not have public electricity in your dwelling, does your village / neighborhood have access to electricity? YES.....1 NO.....2 (► Q28b)	Why does your household not have access to public electricity? LIST UP TO 2 REASONS CONNECTION/WIRING FEE UNAFFORDABLE.....1 (►Q28b) NO NEED FOR ELECTRICITY.....2 (►Q28b) DWELLING INAPPROPRIATE FOR CONNECTION.....3 (►Q28b) APPLICATION PENDING.....4 SERVICE TOO UNRELIABLE.....5 (►Q28b) OTHER (SPECIFY).....6 (►Q28b)	How many weeks have you been waiting for the connection?	Do you have a generator you use in this household? YES..1 NO...2(► Q28f)
HOURS	NAIRA	TIME UNIT	1ST	2ND	WEEKS

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SECTION 11: HOUSING

28c.	28d.	28e.		28f.	28g.	28h.	28i.		29.	30.	31.	32
In which year did you purchase this generator?	What was the purchase price?	What is the capacity of this generator?		Do you have a solar panel source of electricity?	In which year did you install the solar panel?	What was the total cost of the solar panel? (DEVICE + INSTALLATION COST)	What is the capacity of this solar panel?		D R O P P E D	D R O P P E D	Does someone in the household own a GSM phone (<u>cell phone</u>) in working condition?	Estimate the total cost for <u>cell phone</u> service for all household members last month?
		UNIT CODES kilowatt..1 kVA.....2		YES..1 NO...2(▶ Q31)			UNIT CODES kilowatt.1 kVA.....2				YES..1 NO...2 (▶ Q33)	
(YYYY)		POWER	UNIT		(YYYY)	NAIRA	POWER	UNIT				NAIRA

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33	34.		35.	36.	37.	38.	39.
What was your <u>main</u> source of drinking water?	How long does it take you to walk (ONE WAY) to the water source from your dwelling?		What was the total cost of <u>drinking water</u> for your household last month?	What kind of <u>toilet facility</u> does your household use?	Is this toilet facility for the use of:	What kind of <u>refuse disposal</u> facilities does your household use?	How much did you spend on refuse disposal in the last month?
PIPE BORNE WATER TREATED..... 1 PIPE BORNE WATER UNTREATED..... 2 BORE HOLE/HAND PUMP..... 3 WELL/SPRING PROTECTED. .4 WELL/SPRING UNPROTECTED..... 5 RIVER/SPRING..... 6 LAKE/RESERVOIR..... 7 RAIN WATER..... 8 TANKER/TRUCK/VENDOR..... 9 SACHET WATER..... 10 BOTTLE WATER 11 OTHER (SPECIFY) 12	IF WATER IS IN HOUSE OR IN YARD WRITE 0 IN TIME		MINUTE.. 1 HOUR.... 2	NONE..... 1 (▶Q38) TOILET ON WATER.. 2 FLUSH TO SEWAGE.. 3 FLUSH TO SEPTIC TANK..... 4 PAIL/BUCKET..... 5 COVERED PIT LATRINE..... 6 UNCOVERED PIT LATRINE..... 7 V.I.P LATRINE.... 8	HH Members only..... 1 Other HH also..... 2	NONE 1 (▶NEXT SECTION) HH BIN COLLECTED BY GOVERNMENT..... 2 HH BIN COLLECTED BY PRIVATE AGENCY..... 3 GOVERNMENT BIN OR SHED..... 4 DISPOSAL WITHIN COMPOUND..... 5 UNAUTHORISED REFUSE HEAP..... 6 OTHER (SPECIFY) 7	
DRY SEASON	WET SEASON	TIME	UNIT	ENTER 'ZERO' IF NONE			NAIRA

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FLAP A

PREFILL THIS FLAP BEFORE INTERVIEW AND USE WITH SECTIONS 4A & 4B

I N D I V I D U A L I D	1.	2.	3.	4.	5.	6.	I N D I V I D U A L I D
	NAME	What is the sex of [NAME]?	What is [NAME]'s relationship to the head of household?	Is [NAME] still a member of this household?	D R O P P E D	How old is [NAME] (IN COMPLETED YEARS)? IF RESPONDENT DOESN'T KNOW, USE YEAR OF BIRTH TO CALCULATE AGE OR USE MAJOR EVENTS LISTED IN ENUMERATOR MANUAL TO PROMPT RESPONDENT.	
	<p>MAKE A COMPLETE LIST OF ALL INDIVIDUALS WHO NORMALLY LIVE AND EAT THEIR MEALS TOGETHER IN THIS HOUSEHOLD.</p> <p>(CONFIRM THAT HOUSEHOLD HEAD HERE IS SAME AS HOUSEHOLD HEAD LISTED ON IDENTIFICATION PAGE.)</p>	<p>MALE.....1</p> <p>FEMALE..2</p>	<p>HEAD.....01</p> <p>SPOUSE.....02</p> <p>OWN CHILD.....03</p> <p>STEP CHILD.....04</p> <p>ADOPTED CHILD..05</p> <p>GRANDCHILD.....06</p> <p>BROTHER/SISTER.07</p> <p>NIECE/NEPHEW...08</p> <p>BROTHER/ SISTER-IN-LAW.09</p> <p>PARENT.....10</p> <p>PARENT-IN-LAW..11</p> <p>DOMESTIC HELP (RESIDENT).....12</p> <p>DOMESTIC HELP (NON RESIDENT).13</p> <p>OTHER RELATION (SPECIFY)....14</p> <p>OTHER NON- RELATION (SPECIFY).....15</p>	<p>YES...1</p> <p>NO...2 (▶NEXT PERSON)</p>		<p>YEARS</p>	
1							1
2							2
3							3
4							4
5							5
6							6
7							7
8							8
9							9
10							10
11							11
12							12