



Federal Republic of Nigeria
National Bureau of Statistics Abuja, Nigeria

GENERAL HOUSEHOLD SURVEY-PANEL
Wave 4 (2018/19) Post-Planting Visit
Household Questionnaire



THE WORLD BANK
IBRD • IDA | WORLD BANK GROUP

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

SECTION A-1: HOUSEHOLD IDENTIFICATION

ZONE: _____ Name _____ Code
STATE: _____
LGA: _____
SECTOR (Urban=1, Rural=2) _____
EA: _____
RIC: _____
LOCALITY: _____
STRUCTURE ID: _____
HOUSEHOLD NUMBER (WITHIN STRUCTURE) _____
NAME OF HOUSEHOLD HEAD: _____
PHONE NUMBER OF HEAD (IF AVAILABLE) _____
ADDRESS OF HOUSEHOLD HEAD: _____

AG1a. Since the beginning of this agricultural season, did members of this household cultivate any crops including tree crops?

☐ YES.....1
☐ NO.....2

AG2a. Since the beginning of the 2018/2019 agricultural season, did any member of your household own or use any land that you did not cultivate, for example dwelling plot, pastureland, forest, and business/commercial plots?

☐ YES.....1
☐ NO.....2

AG4. In the past 12 months, were you or any other member of your household involved in keeping livestock even if not owned by the household.

☐ YES.....1
☐ NO.....2

AG5. Does your household currently own any livestock that is not kept by members of your household? Even if not owned by the household?

☐ YES.....1
☐ NO.....2

OLD PANEL VS NEW PANEL (Old Panel household=1 New Panel Household=2)

☐

1. Interview Start Time _____

2. Have you been able to identify and locate the household? (Yes=1 No=2)

☐

3. Does the Household live at the same location? (Yes=1 Moved within locality=2)

☐

New address if moved within locality

4. WHAT ARE THE GPS COORDINATES OF THE DWELLING (Outside the Dwelling)?

LATITUDE (N)									LONGITUDE (E)								
—	—	°	—	—	′	—	—	—	—	—	°	—	—	′	—	—	—

5. Is an eligible respondent available to be interviewed? (Yes=1 No= 2)

☐

INTERVIEWER READ OUT Thank you for taking the time to talk to me today. I am working for the National Bureau of Statistics and am here for the General Household Survey. This survey is being conducted throughout the nation to get a better understanding of the wellbeing and livelihoods of households like yours in Nigeria. With this information, the government and other organizations can enact programs to help households in need throughout the country. Your household has been selected for the study by chance. The answers that you give us will be completely confidential and will not be linked to you and your household. Therefore, nobody – in this community, in the government, or any other organization – will know what you tell us. Before we begin, we would like to ask for your explicit oral informed consent. Please note that you are under no obligation to answer any or all of our questions, although it would help us very much if you did. If you do not understand anything, or would like to ask a question, please feel free to do so at any point. If you agree to this interview, you can still choose not to answer any question during the interview, or to terminate the interview at any time. You can also call [NUMBER] if you would like further information or have questions. The interview will take approximately 2 to 4 hours. Do you have anything you want to ask me, or can we start?

6. Did a member of the household give consent to be interviewed? (Yes=1 No=2)

☐

7. Name of member that gave consent:

Interview Status

What is the final result of the interview?

☐

RESULT OF INTERVIEW	
Complete.....	1
Partially complete (refused)	2
Partially complete (unavailable)..	3
Unable to identify household.....	4
Household has moved away.....	5
Long term unavailable.....	6
Refused.....	7

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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.

FLAP A

PREFILL THIS FLAP BEFORE INTERVIEW AND USE WITH SECTIONS 1, 3, 3A, 4A & 4B

I N D I V I D U A L I D	1.	CAPI	4.	4a.	4b.	name_corrected	2.	3.	5.	6.
	NAME AND SURNAME MAKE A COMPLETE LIST OF ALL INDIVIDUALS WHO NORMALLY LIVE AND EAT THEIR MEALS TOGETHER IN THIS HOUSEHOLD. ALL HOUSEHOLD MEMBERS RECORDED DURING WAVE 3 ARE PRE-FILLED IN Q1. FOR ALL PRE-FILLED MEMBERS ANSWER THE QUESTIONS IN THE SUBSECTION ABOUT THE CURRENT MEMBERSHIP STATUS AND THEIR DETAILS. AFTER YOU HAVE ANSWERED FOR ALL PRE-FILLED MEMBERS, ASK IF THERE IS ANY PERSON THAT IS NORMALLY EATING AND SLEEPING WITH THE OTHER PERSONS AND HAS NOT BEEN LISTED. LIST ALL NEW MEMBERS, AND RECORD THEIR DETAILS.	IS [NAME]'S INFORMATION PREFILLED (FROM PREVIOUS PANEL OR AGRICULTURAL LABOUR SURVEY)? YES...1 NO...2 (► Q2)	Is [NAME] still a member of this household? YES...1 NO...2 (► Q29)	Is the pre-filled information for [NAME] correct? YES...1 (► Q3) NO...2	Is the information above for [NAME] correct? SELECT ALL THAT APPLY GENDER IS INCORRECT.....1 (ANSWER Q2) AGE IS INCORRECT.....2 (ANSWER Q6) NAME IS INCORRECT.....3 (ANSWER NAME_CORRECTED)	WHAT IS THE CORRECT NAME?	What is the sex of [NAME]? MALE.....1 FEMALE..2	What is [NAME]'s relationship to the head of household? HEAD.....01 SPOUSE.....02 OWN CHILD.....03 STEP CHILD.....04 ADOPTED CHILD.....05 GRANDCHILD.....06 BROTHER/SISTER..07 NIECE/NEPHEW...08 BROTHER/ SISTER-IN-LAW..09 PARENT.....10 PARENT-IN-LAW..11 DOMESTIC HELP (RESIDENT).....12 DOMESTIC HELP (NON RESIDENT)..13 OTHER RELATION (SPECIFY)....14 OTHER NON-RELATION	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. YEARS
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SECTION 1: ROSTER

I N D I V I D U A L I D	7.	8a.	CAPI-1A	8.	9-11	12.	13.						13a1.	13b1.
	In what year was [NAME] born?	In the past 12 months how many [NAME] been living in this household?	CAPI CHECK: IS THIS PERSON 12 YEARS OR OLDER?	What is [NAME]'s marital status?	N O W I N Q 1 3	Does [NAME]'s spouse/ partner live in this household now?	WRITE ID CODE OF ALL CURRENT SPOUSES WHO LIVE IN THE HOUSEHOLD.						Does [NAME] have a spouse living outside the household?	How many spouses does [NAME] have who are residing elsewhere?
	CHECK THAT AGE IN QUESTION 6 AND YEAR OF BIRTH IN THIS QUESTION ARE CONSISTENT.		YES..1 NO...2 (► Q14)	MARRIED (MONOGAMOUS)...1 MARRIED (POLYGAMOUS)...2 INFORMAL/LOOSE UNION.....3 DIVORCED.....4 (► Q14) SEPARATED.....5 (► Q14) WIDOWED.....6 (► Q14) NEVER MARRIED..7 (► Q14)		YES..1 NO...2 (► Q13a)	In what year did [NAME] get married to [SPOUSE]? IF RESPONDENT DOES NOT KNOW, CALCULATE USING AGE OF SPOUSE AT MARRIAGE						YES...1 NO...2 (► CAPI-1B)	
							FIRST SPOUSE		SECOND SPOUSE		THIRD SPOUSE			
	YEAR (YYYY)	MONTHS				ID CODE	YEAR	ID CODE	YEAR	ID CODE	YEAR		NUMBER	
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SECTION 1: ROSTER

I N D I V I D U A L I D	CAPI-1B	14.	15.	16.	17.	18.	19.	20.
	CAPI: IS [NAME] FROM AN OLD PANEL HOUSEHOLD?	CAPI: WAS THIS PERSON A MEMBER OF THIS HOUSEHOLD IN THE PREVIOUS ROUND OF THE SURVEY (FEB.-APR. 2016)?	D R O P P E D	When did [NAME] join this household? MONTH CODE JAN..01 FEB..02 MAR..03 APR..04 MAY..05 JUN..06 JUL..07 AUG..08 SEP..09 OCT..10 NOV..11 DEC..12 MONTH (MM) YEAR (YYYY)	Why did [NAME] join this household? NEW BORN.....01 ADOPTED CHILD.....02 MARRIAGE /COHABITATION. 03 DIVORCE /SEPARATION.....04 RETURNED FROM COLLEGE/UNIV.....05 RETURNED FROM INSTITUTION.....06 MOVED IN WITH PARENT OR RELATIVE.....07 SHARED ACCOMODATION.....08 RETURN FROM WORK MIGRATION.....09 MISTAKENLY NOT REPORTEDD OR FORGOTTEN LAST VISIT.10 FLED PROBLEM AREAS/ INTERNALLY DISPLACED PERSONS/ CRISIS.....11 OTHER(SPECIFCY).....12	What is [NAME]'S main religion? ASK ONLY TO HEAD AND SPOUSE CHRISTIANITY.1 ISLAM2 TRADITIONAL..3 OTHER (SPECIFY)....4	Does [NAME]'s biological father live in this household? YES..1 NO...2 (► Q21)	What is the individual ID of [NAME]'s biological father? COPY ID FROM ROSTER (► Q24)
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SECTION 1: ROSTER

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I N D I V I D U A L I D	Is [NAME]'s biological father alive?	What was the highest educational level completed by [NAME'S] biological father?	What was the industry of occupation of [NAME'S] biological father?	Does [NAME]'s biological mother live in this household?	What is the person ID of [NAME]'s biological mother?	Is [NAME]'s biological mother alive?	What was the highest educational level completed by [NAME]'S biological mother?
		NONE.....00 LOWER 6.....27 N1.....01 UPPER 6.....28 N2.....02 TEACHER TRAINING.....31 P1.....11 SECONDARY VOCATIONAL/ P2.....12 TECHNICAL/COMMERCIAL..321 P3.....13 TERTIARY VOCATIONAL/ P4.....14 TECHNICAL/COMMERCIAL..322 P5.....15 MODERN SCHOOL.....33 P6.....16 NCE.....34 JS1.....21 POLY/PROF.....41 JS2.....22 1ST DEGREE.....42 JS3.....23 HIGHER DEGREE.....43 SS1.....24 QUARANIC.....51 SS2.....25 INTEGRATED QUARANIC..52 SS326 ADULT EDUCATION.....61	AGRICULTURE.....1 MINING.....2 MANUFACTURING.....3 PROFFESIONAL,SCIENTIFIC, TECHNICAL ACTIVITIES.....4 ELECTRICITY.....5 CONSTRUCTION.....6 TRANSPORTATION.....7 BUYING AND SELLING.....8 FINANCIAL SERVICES.....09 PERSONAL SERVICES.....10 EDUCATION.....11 HEALTH.....12 PUBLIC ADMINISTRATION.....13 OTHER, SPECIFY.....14 NEVER WORKED.....15				NONE.....00 LOWER 6.....27 N1.....01 UPPER 6.....28 N2.....02 TEACHER TRAINING.....31 P1.....11 SECONDARY VOCATIONAL/ P2.....12 TECHNICAL/COMMERCIAL..321 P3.....13 TERTIARY VOCATIONAL/ P4.....14 TECHNICAL/COMMERCIAL..322 P5.....15 MODERN SCHOOL.....33 P6.....16 NCE.....34 JS1.....21 POLY/PROF.....41 JS2.....22 1ST DEGREE.....42 JS3.....23 HIGHER DEGREE.....43 SS1.....24 QUARANIC.....51 SS2.....25 INTEGRATED QUARANIC..52 SS326 ADULT EDUCATION.....61
	YES..1			YES..1	COPY ID FROM ROSTER	YES..1	
NO...2	LEVEL		NO...2 (► Q26)	► NEXT SECTION)	NO...2	LEVEL	

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SECTION 1: ROSTER

	28.	29.	30.	31.	32b	32a.	33.	34.	35-42
	What was the industry of occupation of [NAME]'S biological mother?	Why did [NAME] leave this household?	In which month and year did [NAME] leave this household?	Does [NAME] reside in Nigeria or outside Nigeria now?	Which state did [NAME] move to?	Which LGA did [NAME] move to?	D R O P P E D	How many months has [NAME] been abroad?	D R O P P E D
	AGRICULTURE.....1 MINING.....2 MANUFACTURING.....3 PROFESSIONAL,SCIENTIFIC, TECHNICAL ACTIVITIES.....4 ELECTRICITY.....5 CONSTRUCTION.....6 TRANSPORTATION.....7 BUYING AND SELLING.....8 FINANCIAL SERVICES.....9 PERSONAL SERVICES.....10 EDUCATION.....11 HEALTH.....12 PUBLIC ADMINISTRATION.....13 OTHER, SPECIFY.....14 NEVER WORKED.....15	DIVORCE/SEPARATION.....1 LEFT FOR STUDIES/ EDUCATIONAL OPPORTUNITY.....2 LEFT FOR WORK.....3 LEFT TO FIND BETTER LAND.4 HEALTH REASONS.....5 SECURITY REASONS.....6 FOR MARRIAGE/ COHABITATION.....7 TO JOIN THEIR FAMILY ALREADY LIVING IN ANOTHER LOCATION.....8 MOVED WITH FAMILY.....9 LEFT TO SET UP OWN HOME.10 DEAD.....11 STAYED WITH ORIGINAL HOUSEHOLD.....12 NEVER BEEN A MEMBER / RECORDED WRONGLY IN W3..13 OTHER, (SPECIFY).....-96	MONTH CODE JAN..01 FEB..02 MAR..03 APR..04 MAY..05 JUN..06 JUL..07 AUG..08 SEP..09 OCT..10 NOV..11 DEC..12 IF PERSON HAS DIED ► NEXT PERSON)	INSIDE NIGERIA..1 OUTSIDE OF NIGERIA..2 (► Q34)					
	► NEXT PERSON)		MONTH (MM)	YEAR (YYYY)		STATE	LGA		NUMBER OF MONTHS
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SECTION 3: LABOUR

THIS SECTION IS ONLY ASKED FOR HOUSEHOLD MEMBER 5 YEARS OLD OR OLDER

I N D I V I D U A L I D	1.	2.	3.	4.	4b.	5.	5b.	5c.	6.	6b.
	CAPI: IS THE HOUSEHOLD MEMBER 5 YEARS OLD OR OLDER?	IS [NAME] ANSWERING FOR HIMSELF/HERSELF	WHO IS THE PERSON RESPONDING FOR [NAME]?	During the past 7 days, has [NAME] worked for someone who is not a member of your household, for example, an enterprise, company, the government or any other individual for payment in cash or in-kind?	During the past 7 days, for how many hours in total has [NAME] worked for payment?	During the past 7 days, has [NAME] worked on a farm owned or rented by [NAME] or another member of your household, either in cultivating crops or in other farming tasks, or has [NAME] cared for livestock belonging to [NAME] or another member of your household?	During the past 7 days, how many hours has [NAME] done this agricultural work for the household?	In general, are the products obtained from [NAME]'s work on household agricultural production intended for sale or barter or mainly for use by the household? READ OUT Only for sale/barter..1 Mainly for sale/barter but some for own/family use.....2 Mainly for own/family use but some for sale/barter3 Only for own/family use.....4	During the past 7 days, has [NAME] worked <i>on their own account or in a business enterprise belonging to [NAME] or another household member</i> , for example, as a trader, shop-keeper, barber, dressmaker, carpenter or taxi driver?	During the past 7 days, how many hours has [NAME] worked in the household nonfarm enterprise?
	YES..1 NO...2 (► NEXT PERSON)	YES..1 NO...2	ID CODE	YES..1 NO...2 (► Q5)	HOURS	YES..1 NO...2 (► Q6)	HOURS		YES..1 NO...2 (► Q7)	HOURS
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SECTION 3: LABOUR

APPRENTICESHIP				TEMPORARY ABSENCE				
	7a.	7b.	7c.	7.	8a.	8b.	8c.	8d.
I N D I V I D U A L I D	During the past 7 days, has [NAME] worked as a trainee or apprentice in any career oriented skills?	During the past 7 days, how many hours has [NAME] worked as a trainee or apprentice?	How was/is [NAME]'s apprenticeship training financed? PROBE & SELECT ALL THAT APPLY PAID FOR SOLELY BY PARENTS.....1 FROM PERSONAL SAVINGS.....2 LOANS/BORROWED MONEY.....3 REMITTANCES FROM ABROAD.....4 PROCEEDS FROM FAMILY FARM.....5 PROCEEDS FROM FAMILY NONFARM ENTERPRISE.....6 INCOME FROM FAMILY PROPERTY..7 NGO SUPPORT.....8 GOVT SCHOLARSHIP..9 ASSOCIATION SUPPORT.....10 FAITH BASED ASSISTANCE.....11 RELATIVE/FRIEND..12 OTHER(SPECIFY)..13	CAPI: IS THERE A "YES" RESPONSE IN QUESTIONS 4, 5 OR 6? YES..1 (► Q12b) NO...2	Even though [NAME] did not do any activity in the last 7 days, does [NAME] have a job, business, or other economic or farming/ livestock/ fishing activity that s/he will return to? YES..1 NO...2 (► Q8e)	What is the main reason [NAME] did not work at this activity during the last 7 days? ON LEAVE/HOLIDAY.....1 SICKNESS.....2 PREGNANCY.....8 BUSINESS CLOSED TEMPORARILY.....3 STRIKE, LABOR DISPUTE..4 SHIFT WORK, FLEX TIME..5 SEASONAL WORK6 OTHER(SPECIFY).....7	Is the activity [NAME] plans to return to a household farming, livestock or fishing activity? YES..1 NO...2 (► NEXT PERSON)	Are the products obtained from [NAME's] farming/ fishing or livestock activity mainly intended for ? ONLY FOR SALE/BARTER.....1 MAINLY FOR SALE/ BARTER BUT SOME FOR FAMILY USE.....2 MAINLY FOR OWN/ FAMILY USE BUT SOME FOR SALE/BARTER.....3 ONLY INTENDED FOR FAMILY USE.....4
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JOB SEARCH

I N D I V I D U A L I D	8e.	9a.	9b.	10.
	In the past 4 weeks has [NAME] taken any action to find a paid job or start a business for pay/profit? YES..1 (► Q9b) NO...2	What is the main reason [NAME] did not look for a job in the past 4 weeks? MOST IMPORTANT REASON IN HOUSEHOLD AGRICULTURE / LIVESTOCK / FISHING ACTIVITIES...10 ALREADY FOUND JOB TO START IN THE FUTURE.....1 WAITING FOR RESULTS OF A PREVIOUS SEARCH.....2 AWAITING RECALL FROM A PREVIOUS JOB.....3 WAITING FOR THE SEASON TO START.....4 TIRED OF LOOKING FOR JOBS, NO JOBS IN AREA.....5 NO JOBS MATCHING SKILLS, LACKS EXPERIENCE.....6 CONSIDERED TOO YOUNG/OLD BY EMPLOYERS.....7 CONSIDERED TOO YOUNG/OLD BY HOUSEHOLD.....15 IN STUDIES/SCHOOL, TRAINING.....8 FAMILY / HOUSEHOLD RESPONSIBILITIES.....9 PREGNANCY.....14 DISABILITY, INJURY, ILLNESS.....11 OTHER SOURCES OF INCOME.....12 OTHER (SPECIFY):.....13	What did [NAME] mainly do in the past 4 weeks to find a job or start a business? APPLY TO PROSPECTIVE EMPLOYERS.....1 PLACE OR ANSWER JOB ADVERTISEMENTS.....2 STUDY OR READ JOB ADVERTISEMENTS.....3 REGISTER WITH (EMPLOYMENT CENTER).....4 REGISTER WITH PRIVATE RECRUITMENT OFFICES.....5 TAKE A TEST OR INTERVIEW.....6 SEEK HELP FROM RELATIVES, FRIENDS, OTHERS.....7 CHECK AT FACTORIES, WORK SITES.....8 WAIT ON THE STREET TO BE RECRUITED.....9 SEEK FINANCIAL HELP TO START A BUSINESS.....10 LOOK FOR LAND, BUILDING, EQUIPMENT, MATERIALS TO START A BUSINESS.....11 APPLY FOR PERMIT OR LICENSE TO START A BUSINESS.....12 OTHER (SPECIFY).....13	Was [NAME] available for work during the last 7 days? YES..1 (► Q11a) NO...2

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SECTION 3: LABOUR

						MAIN WAGE JOB	
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What is the main reason [NAME] was not available to work during the last 7 days? IN SCHOOL1 BUSY WITH FARMING ACTIVITIES.....9 BUSY WITH HOUSEHOLD DUTIES.....2 PREGNANCY.....10 TOO YOUNG TO WORK....3 TOO OLD TO WORK.....4 TOO SICK TO WORK.....5 DISABLED.....6 CONFLICT (MILITANCY/INSURGENCY).....8 OTHER (SPECIFY)....-99 APPRENTICE.....11	Would [NAME] want to work if a paid job or business opportunity became available? YES..1 NO...2	If a paid job or business opportunity becomes available, could [NAME] start within the next 2 weeks? YES..1 NO...2	D R O P P E D	CAPI: IS THERE A YES RESPONSE IN Q4? YES..1 NO...2 (► NEXT PERSON)	What is [NAME]'s primary activity in [NAME]'s main wage/salaried job? MAIN WAGE/SALARIED OCCUPATION IN THE LAST 7 DAYS. EXCLUDES NONFARM ENTERPRISE AND HOUSEHOLD AGRICULTURAL ACTIVITIES. PLEASE PROVIDE A DETAILED DESCRIPTION.	In what sector is [NAME]'s main wage activity? AGRICULTURE.....1 MINING.....2 MANUFACTURING.....3 PROFESSIONAL/SCIENTIFIC/TECHNICAL ACTIVITIES.....4 ELECTRICITY/WATER/GAS /WASTE.....5 CONSTRUCTION.....6 TRANSPORTATION.....7 BUYING AND SELLING.....8 FINANCIAL/INSURANCE/REAL EST. SERVICES.....9 PERSONAL SERVICES.....10 EDUCATION.....11 HEALTH.....12 PUBLIC ADMINISTRATION...13 OTHER(SPECIFY).....14	
					WRITTEN DESCRIPTION	(CODE AFTER INTERVIEW)	
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SECTION 3: LABOUR

15.	15b.	15c.	15c1.	15d.	15e.	15f.	15g.	15h.	15i.	15j.
Who is the employer in [NAME]'s main wage job?	Is [NAME]'s main job an apprenticeship job?	How many people work for [NAME]'s employer?	Does [NAME] contribute to the National Housing Fund?	Is [NAME] enrolled in a pension scheme for this job?	Does [NAME] have a written contract/agreement or letter of appointment for this job?	Does [NAME]'s employer provide health insurance coverage (either partial or full)?	Is there a trade union at the place where [NAME] works?	Is [NAME] entitled to paid holidays?	Is [NAME] entitled to paid sick/maternity/paternity leave in this job?	Is [NAME] entitled to any other benefits from your job?
FEDERAL GOV.....1 STATE GOV.....2 LOCAL GOV.....3 PARASTATAL.....4 PRIVATE SECTOR (INCLUDE PAID APPRENTICE).....5 NGO.....6 CO-OPERATIVES.....7 INTERNATIONAL ORGANIZATION /DIPLOMATIC MISSION.....8 RELIGIOUS ORGANIZATION.....9 OTHER (SPECIFY).....10	YES..1 NO...2	NUMBER OF EMPLOYEES 1-5...1 6-10..2 11-20.3 20+...4 DON'T KNOW...-99	YES..1 NO...2 DK....-99	YES..1 NO...2 DK....-99	YES..1 NO...2 DK....-99	YES..1 NO...2 DK....-99	YES..1 NO...2 DK....-99	YES..1 NO...2 DK....-99	YES..1 NO...2 DK....-99	YES..1 NO...2 (► Q16) DK....-99 (► Q16)
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SECTION 3: LABOUR

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What other benefits does [NAME] receive from this job?	During the last 12 months in which month did [NAME] work in this employment? SELECT ALL THAT APPLY	During these months how many weeks in total did [NAME] work in this employment?	How many hours per week did [NAME] normally work in this employment in the past 12 months?	D R O P P E D	D R O P P E D	How much was [NAME]'s last cash payment for this job (excluding in-kind)? RECORD 0 IF NO CASH PAYMENTS IF RESPONDENT HAS NOT YET BEEN PAID, ASK: What payment does he/she expect?
HAZARD ALLOWANCE.....1 LEAVE ALLOWANCE.....2 HOLIDAY BONUS.....3 HOUSING ALLOWANCE.....4 OTHER (SPECIFY)....99	ALL 12 MONTHS....0 JUNE 2017.....1 JULY 2017.....2 AUGUST 2017.....3 SEPTEMBER 2017...4 OCTOBER 2017....5 NOVEMBER 2017...6 DECEMBER 2017...7 JANUARY 2018....8 FEBRUARY 2018...9 MARCH 2018.....10 APRIL 2018.....11 MAY 2018.....12 JUNE 2018.....13 JULY 2018.....14 AUGUST 2018.....15 SEPTEMBER 2018...16 OCTOBER 2018....17 NOVEMBER 2018...18	WEEKS	HOURS PER WEEK			NAIRA

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SECTION 3: LABOUR

I N D I V I D U A L I D	21b.	22.	23.	24a.	24b.	38	38b	25-37 & 38a- 40
	What period of time did this payment cover?	Who in [NAME]'s household decides on the use of these earnings?	Has [NAME] received any in-kind payment or allowance for this work in any other form in the past 12 months?	How much was [NAME]'s last payment in-kind (excluding cash payments)?	What period of time did this payment cover?	In the last 12 months, has any member of this household contributed to the National Health Insurance Scheme (NHIS)?	Which member(s)?	D R O P P E D
	TIME UNIT HOUR.....1 DAY.....2 WEEK.....3 FORTNIGHT..4 MONTH.....5 QUARTER....6 HALF YEAR..7 YEAR.....8	PROBE & SELECT ALL THAT APPLY	[APART FROM SALARY]	EQUIVALENT IN NAIRA	TIME UNIT HOUR.....1 DAY.....2 WEEK.....3 FORTNIGHT..4 MONTH.....5 QUARTER....6 HALF YEAR..7 YEAR.....8	YES...1 NO....2 (► NEXT SECTION)	SELECT ALL THAT APPLY	
TIME UNIT	ID CODE		NAIRA	TIME UNIT		ID CODE		

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SECTION 3B: TIME USE

RESPONDENT: ALL PERSON 5 YEARS OR OLDER

THESE QUESTIONS REFER TO ACTIVITIES PERFORMED WITHOUT ANY PAY.

PERSON ID	1.	2.	3.	4.	5.	6.	7.
	CAPI: IS [NAME] 5 YEARS OLD OR OLDER?	Is [NAME] answering for himself/herself	WHO IS THE PERSON RESPONDING FOR [NAME]?	In the last 7 days, did [NAME] do any of the following activities for the household without pay? SELECT ALL THAT APPLY AND ANSWER THE QUESTION INDICATED Hunt or gather foodstuffs.....1 (ANSWER Q5) Collect firewood or other natural products.....2 (ANSWER Q6) Fetch water.....3 (ANSWER Q7) Cleaning the house, washing or ironing.....4 (ANSWER Q8) Buying food or other items.....5 (ANSWER Q9) Cooking or preparing food or drinks to preserve them.....6 (ANSWER Q10) Making goods (furniture, pottery, clothing, baskets).....7 (ANSWER Q11) Household maintenance or repairs.....8 (ANSWER Q12) Doing construction work to renovate, extend or build the household's dwelling.....9 (ANSWER Q13) Providing care or assistance to adults (15 years or older).....10 (ANSWER Q14) Look after children (14 years or younger).....11 (ANSWER Q15)	How many hours in the last 7 days did [NAME] hunt or gather foodstuffs (e.g. wild berries, nuts) for the household?	How many hours in the last 7 days did [NAME] collect firewood or other natural products for use as fuel by the household?	How many hours in the last 7 days did [NAME] fetch water from natural or public sources for use by the household?
	YES..1 NO...2 ► NEXT	YES...1 No....2	ID CODE		RECORD '0.5' FOR 30 MINUTES. RECORD '0.25' FOR 15 MINUTES.	RECORD '0.5' FOR 30 MINUTES. RECORD '0.25' FOR 15 MINUTES.	INCL. WAITING TIME
					HOURS	HOURS	HOURS
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SECTION 3B: TIME USE

P E R S O N I D	8.	9.	10.	11.	12.	13.	14.	15.
	How many hours in the last 7 days did [NAME] spend cleaning the house, washing or ironing clothes/linen of the household? RECORD '0.5' FOR 30 MINUTES. RECORD '0.25' FOR 15 MINUTES.	How many hours in the last 7 days did [NAME] spend buying food or other items for the household? RECORD '0.5' FOR 30 MINUTES. RECORD '0.25' FOR 15 MINUTES.	How many hours in the last 7 days did [NAME] spend cooking or preparing food or drinks for the household? RECORD '0.5' FOR 30 MINUTES. RECORD '0.25' FOR 15 MINUTES.	How many hours in the last 7 days did [NAME] spend making goods (furniture, pottery, baskets, clothing) for use by the household? RECORD '0.5' FOR 30 MINUTES. RECORD '0.25' FOR 15 MINUTES.	How many hours in the last 7 days did [NAME] spend doing household maintenance or repairs in the household's dwelling (painting, decorating, installations)? RECORD '0.5' FOR 30 MINUTES. RECORD '0.25' FOR 15 MINUTES.	How many hours in the last 7 days did [NAME] spend doing construction work her/himself to renovate, extend or build the household's dwelling? RECORD '0.5' FOR 30 MINUTES. RECORD '0.25' FOR 15 MINUTES.	How many hours in the last 7 days did [NAME] spend providing care or assistance to adults (15 years or older) living in the household because of illness, old age or disability? RECORD '0.5' FOR 30 MINUTES. RECORD '0.25' FOR 15 MINUTES.	How many hours in the last 7 days did [NAME] spend looking after children (14 years or younger) living in the household? RECORD '0.5' FOR 30 MINUTES. RECORD '0.25' FOR 15 MINUTES.
	HOURS	HOURS	HOURS	HOURS	HOURS	HOURS	HOURS	HOURS
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THIS SECTION IS ONLY ASKED FOR HOUSEHOLD MEMBERS 15 YEARS OR OLDER

	1a.	1.	2.	3a.	3.	4.	5.	6.
I N D I V I D U A L D	CAP: IS [NAME] 15 YEARS OLD OR OLDER?	Some people like to keep their money in an account at a bank or microfinance institution. Does [NAME] have a bank account?	In which bank(s) does [NAME] have an account(s)? PROBE & SELECT ALL THAT APPLY ACCESS BANK.....01 DIAMOND BANK.....03 ECOBANK.....04 FCMB.....06 FIDELITY BANK.....07 FIRST BANK.....08 GTB.....10 SKYE BANK.....16 SPRING BANK PLC.....17 STANBIC BANK.....18 STANDARD CHARTERED BANK..19 STERLING BANK.....20 UBA.....21 UNION BANK.....22 UNITY BANK.....23 WEMA BANK.....24 ZENITH BANK.....25 KEYSTONE BANK.....26 MAINSTREAM BANK.....27 MICROFINANCE INSTITUTION.29 JAIZ BANK.....28 HERITAGE BANK.....30 OTHER SPECIFY.....31	Did [NAME] open their account him/herself? IF MORE THAN ONE ACCOUNT, REFER TO THE MAIN ACCOUNT FOR Q3a - Q6	Before [NAME] got this bank(s) account(s), did [NAME] search for information from a range of sources?	Did [NAME] consider any alternatives before [NAME] decided which bank(s) account(s) to get?	Did [NAME] check the terms and conditions of the bank(s) account(s) before [NAME] got it?	Did [NAME] check the terms and conditions of the bank(s) account(s) carefully or just to get a rough idea of what they were? CHECKED CAREFULLY.....1 CHECKED TO HAVE A ROUGH IDEA....2 DK.....-99
	YES..1 NO...2 (► NEXT PERSON)	YES..1 NO...2 (► Q7)		YES..1 NO...2 (► Q7) DK...-99 (► Q7)	YES..1 NO...2 DK...-99	YES..1 NO...2 DK...-99	YES..1 NO...2 (► Q7) DK...-99 (► Q7)	
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12								

SECTION 4A: SAVINGS AND INSURANCE

I N D I V I D U A L I D	7.	8.	9.	10.	11. to 15.
	Is there someone who lets [NAME] cash cheques, transfer funds, or do other banking transactions using their account?	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, has [NAME] used a commercial bank, cooperative, savings association or micro-finance institution to save money?	What type of financial institutions (such as commercial banks, cooperative societies, savings associations, or micro-finance institutions) did [NAME] used to save money in the last 12 months? PROBE & SELECT ALL THAT APPLY COOPERATIVE SOCIETY...1 SAVINGS ASSOCIATION...2 MICRO-FINANCE.....3 COMMERCIAL BANK.....4 OTHER (SPECIFY).....5	Has [NAME] used any informal savings groups (adashi/esusu/ajo) to save money in the past 12 months?	R E P L A C E D
YES..1 NO...2 DK....99	YES..1 NO...2 (► Q10)		YES..1 NO...2		

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16.	17.	17a.	17b.	17c.
At any point in the past 12 months, has any household member been covered by any insurance (e.g. life, health), even if not paid for by themselves, or has any property been covered by any insurance (household goods, house, vehicle and the like) ?	D R O P P E D	What types of insurance has this household had in the past 12 months? PROBE & SELECT ALL THAT APPLY HEALTH.....1 LIFE.....2 PROPERTY.....3 MOTOR VEHICLE...4 EDUCATION.....6 OTHER SPECIFY....5	Which household members have been covered by health insurance at any point in the past 12 months?	Which household members have been covered by life insurance at any point in the past 12 months?
YES..1 NO...2 (► NEXT SECTION)			ID CODE	ID CODE

--	--	--	--

THIS SECTION IS ONLY ASKED FOR HOUSEHOLD MEMBERS 10 YEARS OR OLDER

	1.	1a. to 17.	8.	9.	10. to 13.	14.	15.	15a. to 35.
I N D I V I D U A L I D	CAPI: IS [NAME] 10 YEARS OLD OR OLDER?	D R O P P E D	Does [NAME] have access to a mobile phone?	If [NAME] wanted to make a phone call, who's mobile phone would they use?	D R O P P E D	Does [NAME] have access to the internet?	If [NAME] wanted to use the internet, how would they access it?	D R O P P E D
	YES..1 NO...2 (► NEXT PERSON)		YES..1 NO...2 (► Q14)	OWN.....1 HOUSEHOLD MEMBER.....2 RELATIVE/FRIEND /NEIGHBOR.....3 PAID FOR USE.....4 OTHER (SPECIFY)...5		PERSONAL DEVICE.....1 OTHER HOUSEHOLD DEVICE.....2 RELATIVE/FRIEND/NEIGHBOR.....3 WORKPLACE.....4 CYBERCAFE.....5 PUBLIC WIFI HOTSPOT.....6 OTHER (SPECIFY).....-96		

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SECTION 4C: CREDIT

1. In the last 12 months, have you or anyone else in the household attempted to borrow money or applied for or received a loan from sources such as banks, cooperative societies, savings associations, micro-finance institutions, money lenders etc?

INCLUDE LOAN APPLICATIONS THAT WERE REFUSED/DENIED.

YES....1

NO....2 (►Q16)

☐

LOANS RECEIVED AND LOANS PENDING

L O A N I D	2.	18.	4.	19.	20.	21.	
	<p>What are the names of the persons or institutions from whom you or anyone else in your household attempted to borrow money or applied for a loan over the past 12 months?</p> <p>INCLUDE ALL LOANS APPLIED FOR EVEN IF THEY WERE REJECTED. LIST ALL NAMES AND TYPE BEFORE GOING TO THE NEXT QUESTION.</p> <p>IF MORE THAN ONE LOAN FROM THE SAME PERSON/INSTITUTION, LIST EACH LOAN ON A SEPARATE LINE.</p> <p>LENDER TYPE CODE</p> <p>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. (SPECIFY).....9</p>	<p>Which household member(s) applied for the loan from [LENDER TYPE]?</p> <p>PROBE & SELECT ALL THAT APPLY</p>	<p>What was the <u>main reason</u> for applying for the loan from [LENDER TYPE]?</p> <p>PURCHASE LAND.....1 PURCHASE INPUTS FOR FOOD CROP.....2 PURCHASE INPUTS FOR CASH CROP.....3 PURCHASE LIVESTOCK.....4 BUSINESS START-UP CAPITAL.....5 NON FARM BUSINESS COSTS..6 CEREMONIES (MARRIAGE, BURIAL, OTHER SOCIAL FUNCTIONS ETC).....7 EDUCATION.....8 MOTOR VEHICLE PURCHASE...9 HOME PURCHASE OR CONSTRUCTION.....10 OTHER HOUSEHOLD CONSUMPTION.....11 HEALTH EXPENSES.....12 OTHER (SPECIFY).....13</p>	<p>How much was requested under the loan from [LENDER TYPE]?</p>	<p>Was your application for a loan from [LENDER TYPE] approved?</p> <p>LOAN APPROVED AND RECEIVED.....1 LOAN APPROVED PENDING DISBURSEMENT.....2 AWAITING DECISION ON APPLICATION.....3 (►NEXT LOAN/NEXT SECTION) LOAN NOT APPROVED/GIVEN.....4</p>	<p>After submitting the application for the loan from [LENDER TYPE], how long did it take for your household to hear back about the outcome?</p> <p>WRITE 0 IF IMMEDIATE</p> <p>TIME UNIT</p> <p>DAYS...1 WEEKS...2 MONTHS...3</p>	
	LENDOR NAME	TYPE CODE	ID CODES	NAIRA		NUMBER	TIME UNIT
1							
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3							
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SECTION 4C: CREDIT

L O A N I D	22. IS THE RESPONSE IN Q20 OPTION 4?	23. What were the reasons why your loan application to [LENDER TYPE] 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 DON'T KNOW.....6 OTHER (SPECIFY).....7	24. CAPI: IS THE RESPONSE IN Q20 OPTION 1?	25. How long did it take for your household to receive the loan from [LENDER TYPE] after the loan was approved? WRITE 0 IF IMMEDIATE TIME UNIT DAYS....1 WEEKS...2 MONTHS..3	26. How much was received under the loan from [LENDER TYPE]?	7. Was the amount received from [LENDER TYPE] sufficient to cover the main purpose for applying for the loan (GIVEN IN Q4)?	8. When did your household receive the loan from [LENDER TYPE]?	9. Has the loan from [LENDER TYPE] already been fully repaid?	27. In which month did your household make the final payment on the loan from [LENDER TYPE]?	10. Approximately when does your household expect to make the final payment on the loan from [LENDER TYPE]?	11. At completion of repayment of the loan from [LENDER TYPE], what is the total amount you expect to repay? (INTEREST + PRINCIPAL) ENUMERATOR: HELP RESPONDENT ESTIMATE THIS ▶ NEXT LOAN OR IF NO MORE LOANS, NEXT SECTION)	
	YES..1 NO...2 (▶ Q24)	PROBE & SELECT ALL THAT APPLY IN ORDER OF IMPORTANCE (▶ NEXT LOAN)	YES..1 NO...2 (▶ NEXT LOAN)	NUMBER	TIME UNIT	NAIRA	MONTH (MM)	YEAR (YYYY)	MONTH (MM)	YEAR (YYYY)	MONTH (MM)	YEAR (YYYY)
1												
2												
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4												
5												
6												
7												
8												

<p>16.</p> <p>Did your household have need of a loan in the last 12 months?</p>	<p>17.</p> <p>Why did your household not attempt to borrow in the last 12 months?</p> <p>PROBE & SELECT ALL THAT APPLY IN ORDER OF IMPORTANCE</p> <p>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 BAD CREDIT.....9 STILL REPAYING OTHER LOAN.....10 OTHER (SPECIFY).....8</p>
<p>YES....1</p> <p>NO.....2 ► NEXT SECTION)</p>	

SECTION 5: HOUSEHOLD ASSETS

RESPONDENT:

		1a.	1.	2a.	2.	3.	4.
		Does your household own any [ITEM]?	How many of the following items does your household own?	Is [ITEM] jointly owned by the entire household or owned by individual household members?	Who owns this [ITEM]?	How many years ago was [ITEM] acquired?	If you wanted to sell one of this [ITEM] today, how much would you receive?
		YES...1		OWNED BY ENTIRE HOUSEHOLD.....1 (►Q3) OWNED BY INDIVIDUAL MEMBERS.....2	PROBE & SELECT ALL THAT APPLY	'(IF LESS THAN ONE YEAR, PUT '0') IF MORE THAN ONE, REFER TO NEWEST NUMBER OF YEARS	IF MORE THAN ONE, REFER TO NEWEST
ITEM CODE	ITEM	NO...2 (► NEXT ITEM)	NUMBER OF ITEMS		ID CODE	NUMBER OF YEARS	NAIRA
301	Furniture (3/4 piece sofa set)						
302	Furniture (chairs)						
303	Furniture (table)						
304	Mattress						
305	Bed						
306	Mat						
307	Sewing machine						
308	Gas cooker						
309	Stove (electric)						
310	Stove gas (table)						
311	Stove (kerosene)						
312	Fridge						
313	Freezer						
314	Air conditioner						
315	Washing Machine						
316	Electric Clothes Dryer						
317	Bicycle						
318	Motorbike						
319	Cars and other vehicles						
320	Generator						
321	Fan						

SECTION 5: HOUSEHOLD ASSETS

		1a.	1.	2a.	2.	3.	4.
		Does your household own any [ITEM]?	How many of the following items does your household own?	Is [ITEM] jointly owned by the entire household or owned by individual household members? OWNED BY ENTIRE HOUSEHOLD.....1 (►Q3) OWNED BY INDIVIDUAL MEMBERS.....2	Who owns this [ITEM]?	How many years ago was [ITEM] acquired?	If you wanted to sell one of this [ITEM] today, how much would you receive?
ITEM CODE	ITEM	YES...1 NO...2 (► NEXT ITEM)	NUMBER OF ITEMS		ID CODE	NUMBER OF YEARS	NAIRA
322	Radio						
323	Cassette recorder						
324	Hi-Fi (Sound System)						
325	Microwave						
326	Iron						
327	TV Set						
328	Computer						
329	DVD Player						
330	Satellite Dish						
331	Musical Instrument						
3321	Smartphone						
3322	Mobile phone (excluding smartphones)						
333	Inverter						
3341	Other (Specify):						
3342	Other (Specify):						
3343	Other (Specify):						
3344	Other (Specify):						
3345	Other (Specify):						
3346	Other (Specify):						
3347	Other (Specify):						
3348	Other (Specify):						

SECTION 7A: MEALS AWAY FROM HOME

	1.	2.
	<p>In the <u>past 7 days</u>, did members of this household consume any of the following meals or drinks away from home?</p> <p>I T E M</p> <p>READ OUT EACH ANSWER OPTION AND RECORD YES/NO ANSWER ALL OPTIONS BEFORE PROCEEDING</p> <p>C O D E</p> <p>YES....1 NO....2 (► NEXT ITEM)</p>	<p>How much did you or other household members pay, in total in the last 7 days for [MEAL]? If free, please estimate what it would have cost if you had to pay.</p>
		NAIRA

MEALS PREPARED AND CONSUMED OUTSIDE THE HOME

Full meals (e.g rice and stew, pounded yam and egusi, tuwo, garri & draw soup, etc)	Breakfast	1		
	Lunch	2		
	Dinner	3		
Side dishes like pepper soup, nkwoobi, suya, isiewu, asun etc.		4		
Snacks such as sandwiches, biscuits, meatpies, donuts, popfop, akara, etc		5		
Dairy based beverages such as milk, yoghurt, fura etc.		6		
Vegetables and roasted or boiled items such as(carrot, pears, boiled/roasted corn, roasted plantain, sugar cane, roasted yam etc)		7		
Non alcoholic drinks (Coke, Fanta, zobo, kunu, etc.)		8		
Alcoholic drinks (palm wine, beer, etc.)		9		

SECTION 7B: FOOD CONSUMPTION EXPENDITURE

	I T E M C O D E	1	2.	5.	6.	7.	8.	9.	10.			
		Within the <u>past 7 days</u> , did the members of this household eat/drink any of this [ITEM] <u>within the household</u> ? PLEASE ONLY LIST ITEMS CONSUMED WITHIN THE HOUSEHOLD AND EXCLUDE FOOD CONSUMED OUTSIDE THE HOUSEHOLD. ASK THIS QUESTION FOR ALL ITEMS, BEFORE MOVING TO Q2. YES..1 NO...2 (► NEXT ITEM)	In total, how much [ITEM] did your household <u>consume</u> in the <u>past 7 days</u> ? SEE UNIT CODES ON FLIP PAGE	Of the [QUANTITY] [UNIT] [ITEM] consumed in the last 7 days, how much came from purchases? UNIT AND SIZE SHOULD BE THE SAME AS IN Q2 SEE UNIT CODES ON FLIP PAGE	Of the [QUANTITY] [UNIT] [ITEM] consumed in the last 7 days, how much came from own-production? UNIT AND SIZESHOULD BE THE SAME AS IN Q2	Of the [QUANTITY] [UNIT] [ITEM] consumed in the last 7 days, how much came from gifts and other sources? UNIT AND SIZE SHOULD BE THE SAME AS IN Q2 EXCLUDE FOOD TAKEN OUTSIDE THE HOUSEHOLD.	Did your household purchase any [ITEM] in the past 30 days? YES..1 NO...2 (► NEXT ITEM)	How much [ITEM] did the household purchase in the <u>most recent</u> purchase? SEE UNIT CODES ON FLIP PAGE	How much did your household spent on this [QUANTITY, UNIT, SIZE IN Q9] of [ITEM] ? NAIRA			
			QUANTITY	UNIT	SIZE	QUANTITY	QUANTITY	QUANTITY	QUANTITY	UNIT	SIZE	NAIRA

GRAINS AND FLOURS

Guinea corn/sorghum	10											
Millet	11											
Rice - local	13											
Rice - imported	14											
Maize flour	16											
Yam flour	17											
Cassava flour	18											
Wheat flour	19											
Maize (Unshelled/On the cob)	20											
Maize (Shelled/Off the cob)	22											
Other grains and flour (specify)	23											

BAKED/PROCESSED PRODUCTS

Bread	25											
Cake	26											
Buns/Pofpof/Donuts	27											
Biscuits	28											
Meat Pie/Sausage Roll	29											

SECTION 7B: FOOD CONSUMPTION EXPENDITURE

	I T E M C O D E	1. Within the <u>past 7 days</u> , did the members of this household eat/drink any of this [ITEM] <u>within the household</u> ? PLEASE ONLY LIST ITEMS CONSUMED WITHIN THE HOUSEHOLD AND EXCLUDE FOOD CONSUMED OUTSIDE THE HOUSEHOLD. ASK THIS QUESTION FOR ALL ITEMS, BEFORE MOVING TO Q2. YES..1 NO...2 (► NEXT ITEM)	2. In total, how much [ITEM] did your household <u>consume</u> in the <u>past 7 days</u> ? SEE UNIT CODES ON FLIP PAGE	5. Of the [QUANTITY] [UNIT] [ITEM] consumed in the last 7 days, how much came from purchases? UNIT AND SIZE SHOULD BE THE SAME AS IN Q2 SEE UNIT CODES ON FLIP PAGE	6. Of the [QUANTITY] [UNIT] [ITEM] consumed in the last 7 days, how much came from own-production? UNIT AND SIZESHOULD BE THE SAME AS IN Q2	7. Of the [QUANTITY] [UNIT] [ITEM] consumed in the last 7 days, how much came from gifts and other sources? UNIT AND SIZE SHOULD BE THE SAME AS IN Q2 EXCLUDE FOOD TAKEN OUTSIDE THE HOUSEHOLD.	8. Did your household purchase any [ITEM] in the past 30 days? YES..1 NO...2 (► NEXT ITEM)	9. How much [ITEM] did the household purchase in the <u>most recent</u> purchase? SEE UNIT CODES ON FLIP PAGE	10. How much did your household spent on this [QUANTITY, UNIT, SIZE IN Q9] of [ITEM] ?			
			QUANTITY	UNIT	SIZE	QUANTITY	QUANTITY	QUANTITY	QUANTITY	UNIT	SIZE	NAIRA

STARCHY ROOTS, TUBERS & PLANTAIN

Cassava - roots	30											
Yam - roots	31											
Gari - white	32											
Gari - yellow	33											
Cocoyam	34											
Plantains	35											
Sweet potatoes	36											
Potatoes	37											
Other roots and tuber (specify)	38											

PULSES, NUTS AND SEEDS

Soya beans	40											
Brown beans	41											
White beans	42											
Groundnuts (Unshelled)	43											
Groundnuts (Shelled)	44											
Coconut	46											
Kola nut	47											
Cashew nut	48											
Other nuts/seeds/pulses (specify)	45											

SECTION 7B: FOOD CONSUMPTION EXPENDITURE

I T E M C O D E	1	2.			5.	6.	7.	8.	9.			10.
	<p>Within the <u>past 7 days</u>, did the members of this household eat/drink any of this [ITEM] <u>within the household</u>?</p> <p>PLEASE ONLY LIST ITEMS CONSUMED WITHIN THE HOUSEHOLD AND EXCLUDE FOOD CONSUMED OUTSIDE THE HOUSEHOLD.</p> <p>ASK THIS QUESTION FOR ALL ITEMS, BEFORE MOVING TO Q2.</p> <p>YES..1 NO...2 ► NEXT ITEM)</p>	<p>In total, how much [ITEM] did your household <u>consume</u> in the <u>past 7 days</u>?</p> <p>SEE UNIT CODES ON FLIP PAGE</p>			<p>Of the [QUANTITY] [UNIT] [ITEM] consumed in the last 7 days, how much came from purchases?</p> <p>UNIT AND SIZE SHOULD BE THE SAME AS IN Q2</p> <p>SEE UNIT CODES ON FLIP PAGE</p>	<p>Of the [QUANTITY] [UNIT] [ITEM] consumed in the last 7 days, how much came from own-production?</p> <p>UNIT AND SIZESHOULD BE THE SAME AS IN Q2</p>	<p>Of the [QUANTITY] [UNIT] [ITEM] consumed in the last 7 days, how much came from gifts and other sources?</p> <p>UNIT AND SIZE SHOULD BE THE SAME AS IN Q2</p> <p>EXCLUDE FOOD TAKEN OUTSIDE THE HOUSEHOLD.</p>	<p>Did your household purchase any [ITEM] in the past 30 days?</p> <p>YES..1 NO...2 ► NEXT ITEM)</p>	<p>How much [ITEM] did the household purchase in the <u>most recent</u> purchase?</p> <p>SEE UNIT CODES ON FLIP PAGE</p>			<p>How much did your household spent on this [QUANTITY, UNIT, SIZE IN Q9] of [ITEM] ?</p> <p>NAIRA</p>

OIL AND FATS

[illegible]

FRUITS

[illegible]

SECTION 7B: FOOD CONSUMPTION EXPENDITURE

	I T E M C O D E	1	2.	5.	6.	7.	8.	9.	10.			
		Within the <u>past 7 days</u> , did the members of this household eat/drink any of this [ITEM] <u>within the household</u> ? PLEASE ONLY LIST ITEMS CONSUMED WITHIN THE HOUSEHOLD AND EXCLUDE FOOD CONSUMED OUTSIDE THE HOUSEHOLD. ASK THIS QUESTION FOR ALL ITEMS, BEFORE MOVING TO Q2. YES..1 NO...2 (► NEXT ITEM)	In total, how much [ITEM] did your household <u>consume</u> in the <u>past 7 days</u> ? SEE UNIT CODES ON FLIP PAGE	Of the [QUANTITY] [UNIT] [ITEM] consumed in the last 7 days, how much came from purchases? UNIT AND SIZE SHOULD BE THE SAME AS IN Q2 SEE UNIT CODES ON FLIP PAGE	Of the [QUANTITY] [UNIT] [ITEM] consumed in the last 7 days, how much came from own-production? UNIT AND SIZESHOULD BE THE SAME AS IN Q2	Of the [QUANTITY] [UNIT] [ITEM] consumed in the last 7 days, how much came from gifts and other sources? UNIT AND SIZE SHOULD BE THE SAME AS IN Q2 EXCLUDE FOOD TAKEN OUTSIDE THE HOUSEHOLD.	Did your household purchase any [ITEM] in the past 30 days? YES..1 NO...2 (► NEXT ITEM)	How much [ITEM] did the household purchase in the <u>most recent</u> purchase? SEE UNIT CODES ON FLIP PAGE	How much did your household spent on this [QUANTITY, UNIT, SIZE IN Q9] of [ITEM] ? NAIRA			
			QUANTITY	UNIT	SIZE	QUANTITY	QUANTITY	QUANTITY	QUANTITY	UNIT	SIZE	NAIRA

VEGETABLES

Tomatoes	70											
Tomato puree (canned)	71											
Onions	72											
Garden eggs/egg plant	73											
Okra - fresh	74											
Okra - dried	75											
Fresh Pepper	76											
Dry Pepper	77											
Leaves (Cocoyam, Spinach, etc.)	78											
Other vegetables (fresh or canned) (specify)	79											

POULTRY AND POULTRY PRODUCTS

Chicken	80											
Duck	81											
Other domestic poultry	82											
Agricultural eggs	83											
Local eggs	84											
Other eggs (not chicken) (specify)	85											

I T E M C O D E	1	2.			5.	6.	7.	8.	9.			10.
	<p>Within the <u>past 7 days</u>, did the members of this household eat/drink any of this [ITEM] <u>within the household</u>?</p> <p>PLEASE ONLY LIST ITEMS CONSUMED WITHIN THE HOUSEHOLD AND EXCLUDE FOOD CONSUMED OUTSIDE THE HOUSEHOLD.</p> <p>ASK THIS QUESTION FOR ALL ITEMS, BEFORE MOVING TO Q2.</p> <p>YES..1 NO...2 (► NEXT ITEM)</p>	<p>In total, how much [ITEM] did your household <u>consume</u> in the <u>past 7 days</u>?</p> <p>SEE UNIT CODES ON FLIP PAGE</p>			<p>Of the [QUANTITY] [UNIT] [ITEM] consumed in the last 7 days, how much came from purchases?</p> <p>UNIT AND SIZE SHOULD BE THE SAME AS IN Q2</p> <p>SEE UNIT CODES ON FLIP PAGE</p>	<p>Of the [QUANTITY] [UNIT] [ITEM] consumed in the last 7 days, how much came from own-production?</p> <p>UNIT AND SIZESHOULD BE THE SAME AS IN Q2</p>	<p>Of the [QUANTITY] [UNIT] [ITEM] consumed in the last 7 days, how much came from gifts and other sources?</p> <p>UNIT AND SIZE SHOULD BE THE SAME AS IN Q2</p> <p>EXCLUDE FOOD TAKEN OUTSIDE THE HOUSEHOLD.</p>	<p>Did your household purchase any [ITEM] in the past 30 days?</p> <p>YES..1 NO...2 (► NEXT ITEM)</p>	<p>How much [ITEM] did the household purchase in the <u>most recent</u> purchase?</p> <p>SEE UNIT CODES ON FLIP PAGE</p>			<p>How much did your household spent on this [QUANTITY, UNIT, SIZE IN Q9] of [ITEM] ?</p> <p>NAIRA</p>
	QUANTITY	UNIT	SIZE	QUANTITY	QUANTITY	QUANTITY	QUANTITY	QUANTITY	QUANTITY	UNIT	SIZE	NAIRA

[illegible]

SECTION 7B: FOOD CONSUMPTION EXPENDITURE

	I T E M	1	2.	5.	6.	7.	8.	9.	10.
		<p>Within the <u>past 7 days</u>, did the members of this household eat/drink any of this [ITEM] <u>within the household</u>?</p> <p>PLEASE ONLY LIST ITEMS CONSUMED WITHIN THE HOUSEHOLD AND EXCLUDE FOOD CONSUMED OUTSIDE THE HOUSEHOLD.</p> <p>ASK THIS QUESTION FOR ALL ITEMS, BEFORE MOVING TO Q2.</p> <p>YES..1 NO...2 (► NEXT ITEM)</p>	<p>In total, how much [ITEM] did your household <u>consume</u> in the <u>past 7 days</u>?</p> <p>SEE UNIT CODES ON FLIP PAGE</p>	<p>Of the [QUANTITY] [UNIT] [ITEM] consumed in the last 7 days, how much came from purchases?</p> <p>UNIT AND SIZE SHOULD BE THE SAME AS IN Q2</p> <p>SEE UNIT CODES ON FLIP PAGE</p>	<p>Of the [QUANTITY] [UNIT] [ITEM] consumed in the last 7 days, how much came from own-production?</p> <p>UNIT AND SIZESHOULD BE THE SAME AS IN Q2</p>	<p>Of the [QUANTITY] [UNIT] [ITEM] consumed in the last 7 days, how much came from gifts and other sources?</p> <p>UNIT AND SIZE SHOULD BE THE SAME AS IN Q2</p> <p>EXCLUDE FOOD TAKEN OUTSIDE THE HOUSEHOLD.</p>	<p>Did your household purchase any [ITEM] in the past 30 days?</p> <p>YES..1 NO...2 (► NEXT ITEM)</p>	<p>How much [ITEM] did the household purchase in the <u>most recent</u> purchase?</p> <p>SEE UNIT CODES ON FLIP PAGE</p>	<p>How much did your household spent on this [QUANTITY, UNIT, SIZE IN Q9] of [ITEM] ?</p>
			QUANTITY UNIT SIZE	QUANTITY	QUANTITY	QUANTITY		QUANTITY UNIT SIZE	NAIRA

COFFEE, TEA, COCOA AND THE LIKE BEVERAGES

Coffee	120											
Chocolate drinks (including Milo)	121											
Tea	122											

SUGAR, SWEETS AND CONFECTIONARY

Sugar	130											
Honey	132											
Other sweets and confectionary (specify)	133											

OTHER MISCELLANEOUS FOODS

Salt	141											
Unground Ogbono	142											
Ground Ogbono	143											
Ground Pepper	144											
Melon (shelled)	145											
Melon (unshelled)	146											
Mellon (ground)	147											
Other Spices	148											

I T E M C O D E	1	2.			5.	6.	7.	8.	9.			10.
	Within the <u>past 7 days</u> , did the members of this household eat/drink any of this [ITEM] <u>within the household</u> ?	In total, how much [ITEM] did your household <u>consume</u> in the <u>past 7 days</u> ?			Of the [QUANTITY] [UNIT] [ITEM] consumed in the last 7 days, how much came from purchases?	Of the [QUANTITY] [UNIT] [ITEM] consumed in the last 7 days, how much came from own-production?	Of the [QUANTITY] [UNIT] [ITEM] consumed in the last 7 days, how much came from gifts and other sources?	Did your household purchase any [ITEM] in the past 30 days?	How much [ITEM] did the household purchase in the <u>most recent</u> purchase?			How much did your household spent on this [QUANTITY, UNIT, SIZE IN Q9] of [ITEM] ?
	PLEASE ONLY LIST ITEMS CONSUMED WITHIN THE HOUSEHOLD AND EXCLUDE FOOD CONSUMED OUTSIDE THE HOUSEHOLD. ASK THIS QUESTION FOR ALL ITEMS, BEFORE MOVING TO Q2. YES..1 NO...2 (► NEXT ITEM)	SEE UNIT CODES ON FLIP PAGE			UNIT AND SIZE SHOULD BE THE SAME AS IN Q2 SEE UNIT CODES ON FLIP PAGE	UNIT AND SIZESHOULD BE THE SAME AS IN Q2	UNIT AND SIZE SHOULD BE THE SAME AS IN Q2 EXCLUDE FOOD TAKEN OUTSIDE THE HOUSEHOLD.	YES..1 NO...2 (► NEXT ITEM)	SEE UNIT CODES ON FLIP PAGE			NAIRA

[illegible][illegible]

FOOD ITEM UNIT CODES

<i>UNIT</i>	<i>CODE</i>
Kilograms (Kg)	1
Grams (g)	2
Litres (l)	3
Centilitres (cl)	4
Bin/basket	10
Paint Rubber	11
Milk cup	12
Cigarette cup	13
Tin	14
Congo	20
Mudu	30
Derica	40
Tiya Small	50
Kobiowu	60
Bowl	70
Piece	80
Heap	90
Bunch / Bundle	100
Stalk	110
Packet/sachet	120
Sack/Bag	130
Basket	140
Loaf	200
Other (specify)	900

<i>SIZE</i>	<i>CODE</i>
SMALL	0
MEDIUM	1
LARGE	2
VERY LARGE	3
10 LITRES	4
20 LITRES	5
25 LITRES	6
50 LITRES	7
25 KG.	10
50 KG	11
100 KG	12
33 CL	20
35 CL	21
50 CL	22
60 CL	23
75 CL	24
1 LITRE	25
1.5 LITRE	26
ONE SIZE ONLY	99

SECTION 8: NON-FOOD EXPENDITURE

7 DAYS

ITEM	I T E M C O D E	1. Over the past 7 days, did the household purchase any [...]?	2. In total, how much did your household spend on [ITEM] in the past 7 days?
		YES....1 NO....2 (► NEXT ITEM)	NAIRA
Cigarettes or tobacco	101		
Matches	102		
Newspaper and magazines	103		
Public transport for commuting (moto, okada, keke, bus, boat, etc) EXCLUDE EDUCATION RELATED EXPENSES	104		
Gambling, lotto, raffles	105		

30 DAYS RECALL

ITEM	I T E M C O D E	3. Over the past 30 days, did the household purchase or pay for any [...]?	4. In total, how much did your household spend on [ITEM] in the past 30 days?
		YES....1 NO....2 (► NEXT ITEM)	NAIRA
Petrol	309		
Diesel	310		
Lubricants (oil, grease, etc)	330		
Light bulbs/globes	311		
Water	312		
Soap and Washing powder	313		
Toilet paper	314		
Personal care goods (razor blades, cosmetics)	315		
Vitamin supplements	316		
Insecticides, disinfectant and cleaners	317		
Postal (inc. Stamps, courier)	318		
Recharge cards	319		
Landline charges	320		
Internet Services	321		
Recreational (Cinemas, video/DVD rental)	322		
Motor vehicle service, repair, or parts	323		
Bicycle service, repair, or parts	324		
Wages paid to staff/maid/lawnsboy	325		
Mortgage - regular payment to purchase house	326		
Repairs & maintenance to dwelling	327		
Repairs to household and personal items (radios, watches, etc.)	328		
House Rent	329		

30 DAYS RECALL

ITEM	I T E M C O D E	3. Over the past 30 days, did the household purchase or pay for any [...]?	4. In total, how much did the household spend on [ITEM] in the past 30 days?
		YES....1 NO....2 (► NEXT ITEM)	NAIRA
Kerosene	301		
Palm Kernel Oil	302		
Gas (for lighting/cooking)	303		
Other liquid cooking fuel	304		
Electricity, including electricity vouchers	305		
Candle	306		
Firewood	307		
Charcoal	308		

SECTION 8: NON-FOOD EXPENDITURE

6 month recall

	I T E M C O D E	5. Over the past 6 months, did the household purchase or pay for any [...]? YES....1 NO....2 (► NEXT ITEM)	6. In total, how much did your household spend on [ITEM] in the past 6 months? NAIRA
Infant Clothing	401		
Baby nappies/diapers	402		
Boys Tailored clothes	403		
Boys dress (ready made)	404		
Girls Tailored clothes	405		
Girls dress (ready made)	406		
Men Tailored clothes	407		
Men dress (ready made)	408		
Women Tailored clothes	409		
Women dress (ready made)	410		
Ankara, George materials	411		
Hand loomed: ASO-OKE	431		
Other clothing materials	412		
Boy's shoes	413		
Men's shoes	414		
Girl's shoes	415		
Lady's shoes	416		
Repairs of footwear	432		
Tailoring charges	417		
laundry and dry cleaning	418		
Bowls, glassware, plates, silverware, etc.	419		
Cooking utensils (cookpots, stirring spoons and wisks, etc.)	420		
Cleaning utensils (brooms, brushes, etc.)	421		

6 month recall

	I T E M C O D E	5. Over the past 6 months, did the household purchase or pay for any [...]? YES....1 NO....2 (► NEXT ITEM)	6. In total, how much did your household spend on [ITEM] in the past 6 months? NAIRA
Electric kettle	433		
Coal pot/other non-electric app	434		
Repairs of appliances	435		
Torch / flashlight	422		
Umbrella and raincoat	423		
Paraffin lamp (hurricane or pressure)	424		
Stationery items (not for school)	425		
Books (not for school)	426		
House decorations	427		
Bed sheets, bed cover, blanket,	436		
Pillow	437		
Curtain and other linen	438		
Carpet and other floor covering	439		
Cell phone hand set	440		
Personal computer	441		
Night's lodging in rest house or hotel	428		
Donations to church, mosque, other religious group	429		
Health expenditures (excluding insurance)	430		

SECTION 9: FOOD SECURITY

ENUMERATOR: RECORD
PRIMARY RESPONDENT ID

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

8. Now I would like to ask you some questions about food. During the last 30 days, was there a time when:

8a.	8b.	8c.	8d.	8e.
You or any other adult in your household worried about not having enough food to eat because of lack of money or other resources?	You, or any other adult in your household, were unable to eat healthy and nutritious/preferred foods because of a lack of money or other resources?	You, or any other adult in your household, ate only a few kinds of foods because of a lack of money or other resources?	You, or any other adult in your household, had to skip a meal because there was not enough money or other resources to get food?	You, or any other adult in your household, ate less than you thought you should because of a lack of money or other resources?
YES.....1 NO.....2	YES.....1 NO.....2	YES.....1 NO.....2	YES.....1 NO.....2	YES.....1 NO.....2

--	--	--	--	--

8f.	8g.	8h.	8i.	8j.
Your household ran out of food because of a lack of money or other resources?	You, or any other adult in your household, were hungry but did not eat because there was not enough money or other resources for food?	You, or any other adult in your household, went without eating for a whole day because of a lack of money or other resources?	You, or any other adult in your household, restricted consumption in order for children to eat?	You, or any other adult in your household, borrowed food, or relied on help from a friend or relative?
YES.....1 NO.....2	YES.....1 NO.....2	YES.....1 NO.....2	YES.....1 NO.....2	YES.....1 NO.....2

--	--	--	--	--

SECTION 9: FOOD SECURITY

<p>2. Normally, how many meals, including breakfast, are taken per day in your household by</p> <p>PUT 9999 IF NO CHILDREN UNDER 60 MONTHS</p>			<p>5. In the past 12 months, have you been faced with a situation where you did not have enough food to feed the household?</p>	<p>6. When did you experience this incident ?</p> <p>PROBE & SELECT ALL THAT APPLY</p> <p>JUL 17...7 APR 18...16 AUG 17...8 MAY 18...17 SEP 17...9 JUN 18...18 OCT 17...10 JUL 18...19 NOV 17...11 AUG 18...20 DEC 17...12 SEP 18...21 JAN 18...13 OCT 18...22 FEB 18...14 MAR 18...15</p>	<p>7. What were the causes of this situation?</p> <p>PROBE & SELECT UP TO THREE IN ORDER OF IMPORTANCE; USE CODES BELOW</p>
a. Adults(15 yrs and older)	b1. Children (5-15 years old)	b. Children (6-59 months)	<p>YES.....1</p> <p>NO.....2 ► NEXT SECTION)</p>		
NUMBER	NUMBER	NUMBER			

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

CODES FOR Q7:

INADEQUATE HOUSEHOLD STOCKS
DUE TO DROUGHT/POOR RAINS.....1

INADEQUATE HOUSEHOLD FOOD STOCKS
DUE TO CROP PEST DAMAGE.....2

INADEQUATE HOUSEHOLD FOOD STOCKS
DUE TO SMALL LAND SIZE.....3

INADEQUATE HOUSEHOLD FOOD STOCKS
DUE TO LACK OF FARM INPUTS.....4

INADEQUATE FOOD STOCK FROM FARM
DUE TO CONFLICT/SECURITY.....10

FOOD IN THE MARKET WAS
VERY EXPENSIVE.....5

UNABLE TO REACH THE MARKET DUE TO
HIGH TRANSPORTATION COSTS.....6

UNABLE TO REACH THE MARKET DUE TO
CONFLICT/SECURITY.....11

NO FOOD IN THE MARKET.....7

LACK OF MONEY.....12

FLOODS/WATER LOGGING.....8

OTHER (SPECIFY).....9

SECTION 11: HOUSING

1a.	1b.	1.	2.	3.	4.	5a.	5b.	5c.
ENUMERATOR INDICATE THE MAIN RESPONDENT FOR THIS SECTION	ENUMERATOR: WHAT TYPE OF DWELLING DOES THE HOUSEHOLD LIVE IN? SEPARATE HOUSE(BUNGALOW) ..1 SEMI-DETACHED HOUSE.....2 FLAT/APARTMENT.....3 COMPOUND HOUSE (SEPARATE ROOMS, SHARING FACILITIES).....4 HUTS/BUILDINGS [SHARE COMPOUND].....5 HUTS/BUILDINGS [PRIVATE COUMPOUND].....6 TENTS.....7 IMPROVISED HOME (KIOSK, CONTAINER).....8 LIVING QUARTERS ATTACHED TO OFFICE/SHOP..9 UNCOMPLETED BUILDING.....10 OTHER SPECIFY.....11	Does your household own, rent or stay for free in the dwelling that your household currently occupies? OWNED.....1 FREE, AUTHORIZED...3 (► Q3) FREE, NOT AUTHORIZED....4 (►Q3) RENTED5 (►Q4)	If your household <u>sold</u> <u>this dwelling</u> today, how much would you receive for it? TIME UNIT MONTH....1 YEAR.....2	If you were to rent this dwelling on the open market how much would you have to pay? TIME UNIT MONTH....1 YEAR.....2	How much does your household <u>pay to rent</u> this dwelling? IF IN KIND, INCLUDE VALUE OF IN KIND PAYMENTS TIME UNIT MONTH....1 YEAR.....2	What type of documentation does your household have to back occupancy status? CERTIFICATE OF OCCUPANCY...1 RIGHT OF OCCUPANCY.....8 LEASEHOLD.....2 FREEHOLD.....3 TENANCY AGREEMENT.....4 RECEIPT OF PAYMENT.....5 NONE.....6 (►Q5) OTHER (SPECIFY) .7	Are any members of the household listed on the [DOCUMENT]? YES..1 NO...2 ► Q5)	Which members of the household are listed on the [DOCUMENT] PROBE & SELECT ALL THAT APPLY
ID CODE			NAIRA	NAIRA	TIME UNIT	NAIRA	TIME UNIT	ID CODES

5.	6.	7.	8.	9.	40.	41.
In what year was this structure built?	MAIN CONSTRUCTION MATERIAL OF THE OUTSIDE WALLS OF THE DWELLING OBSERVE, DO NOT READ OUT MUD.....1 STONE.....2 UNBURNT BRICKS..3 BURNT BRICKS....4 CEMENT OR CONCRETE.....5 WOOD OR BAMBOO.....6 IRON SHEETS.....7 CARDBOARD.....8 OTHER(SPECIFY)..9	MAIN CONSTRUCTION MATERIAL OF THE ROOFING OF THE DWELLING OBSERVE, DO NOT READ OUT THATCH (GRASS OR STRAW).....1 CORRUGATED IRON SHEETS.....2 CLAY TILES.....3 CONCRETE/CEMENT.....4 PLASTIC SHEET.....5 ASBESTOS SHEET.....6 MUD.....7 STEP TILES.....8 LONG/SHORT SPAN SHEETS.....9 OTHER (SPECIFY).....10	MAIN CONSTRUCTION MATERIAL OF THE FLOORING OF THE DWELLING OBSERVE, DO NOT READ OUT SAND/DIRT/ STRAW.....1 SMOOTHED MUD...2 SMOOTH CEMENT/ CONCRETE.....3 WOOD.....4 TILE.....5 OTHER(SPECIFY).6 TERRAZO.....7	How many separate rooms do the members of your household occupy? (DO NOT COUNT BATHROOMS, TOILETS, STOREROOM S, OR GARAGE)	What type of cookstove is your primary cookstove ? DOES NOT COOK.....0 3-STONE/OPEN FIRE STOVE.....1 SELF-BUILT BIOMASS (CHARCOAL, WOOD, CROP RESIDUE, ETC.) STOVE.....2 MANUFACTURED BIOMASS STOVE (CHARCOAL, WOOD, CROP RESIDUE, ETC.).....3 LPG/NATURAL GAS STOVE.....5 KEROSENE STOVE.....6 ELECTRIC STOVE.....7 OTHER (SPECIFY).....8	Where does your household normally cook with the cookstove? IN DWELLING, NOT A SLEEPING AREA.....1 IN DWELLING, IN A SLEEPING AREA.....2 IN A SEPARATE DWELLING.....3 IN A VERANDA (ROOFED PLATFORM WITH AT LEAST TWO OPEN SIDES).....4 (►Q13) OUTDOORS.....5 (►Q13) OTHER (SPECIFY).....6
YEAR				NUMBER OF ROOMS		

SECTION 11: HOUSING

42.	43.	44.	45.	46.	47.	48.	49.
Do you usually use a chimney, hood or other exhaust system while using this stove?	In the last 12 months, what are the fuels you commonly used for this cookstove? ASK ONLY IF Q10= 1, 2, 3, 5, OR 8 PROBE & SELECT TWO MOST USED FUELS IN ORDER OF MOST USED KEROSENE.....1 COAL/LIGNITE.....2 CHARCOAL.....3 WOOD.....4 SOLAR.....5 ANIMAL WASTE/DUNG.....6 CROP RESIDUE/PLANT BIOMASS...7 SAW DUST.....8 COAL BRIQUETTE.....9 BIOMASS BRIQUETTE.....10 PROCESSED BIOMASS (PELLETS)/WOODCHIPS.....11 ETHANOL.....12 BIOGAS.....13 LPG/ COOKING GAS.....14 PIPED NATURAL GAS.....15 ELECTRIC.....16 GARBAGE/PLASTIC.....17 OTHER (SPECIFY).....18	How much did your household spend on the [FUEL TYPE IN Q43] for this stove in the last month/in a typical month when you use the stove? IN NAIRA? ENTER THE ACTUAL AMOUNT SPENT, NOT THE MARKET VALUE OF THE FUEL	In the past 12 months, did members of this household suffer from any harm, injury or health problem, or was any property of the household damaged as a direct result of cooking with this cook stove? YES.....1 NO.....2 (► Q47)	In the last 12 months, what harm/injury happened from this cookstove? PROBE & SELECT ALL THAT APPLY IN ORDER OF SEVERITY DEATH.....2 PERMANENT PHYSICAL DAMAGE TO ANY PERSON IN THE HOUSEHOLD.....3 BURNS/FIRE/POISONING...4 SEVERE COUGH/ RESPIRATORY PROBLEM...5 FIRE WITH NO INJURY...6 OTHER (SPECIFY).....7	Do you have electricity from any source in your household? YES..1 NO...2 (► Q33)	What are all the sources of electricity that your household use regularly? PROBE & SELECT ALL THAT APPLY PHCN/NEPA.....1 LOCAL MINI GRID.....2 GENERATOR.....3 SOLAR HOME SYSTEM...4 SOLAR LANTERN/ LIGHTING SYSTEM...5 SOLAR LANTERN/LIGHTING SYSTEM..5 RECHARGEABLE BATTERY.....6 OTHER (SPECIFY).....7	What is the MAIN source of electricity that your household uses most of the time? PHCN/NEPA.....1 LOCAL MINI GRID....2 GENERATOR.....3 SOLAR HOME SYSTEM..4 SOLAR LANTERN/ LIGHTING SYSTEM...5 RECHARGEABLE BATTERY.....6 OTHER (SPECIFY)....7
	1ST	2ND	1ST	2ND			
YES..1 NO...2							

50.	51.	52.	53.	54.	33.	55.	56.	57.	58.	
On average, how many hours of electricity were available <u>each day</u> during the last 7 days from [NAME MAIN electricity system]? (max 24 hours)	On average, how many hours of electricity were available each evening during the last 7 days, from 6:00 pm to 10:00 pm from [NAME MAIN electricity system]? (max 4 hours)	During the past 7 days, how many outages/blackouts of [NAME MAIN electricity system] happen? ONLY ASK IF Q49=1 or 2	During the past 7 days, how many hours long was a typical outage/ blackout from [NAME MAIN electricity system] ? ONLY ASK IF Q49=1 or 2	In the last 12 months, did any of your appliances get damaged because of issues in the electrical system? YES..1 NO...2 DK...-99	What is the main source of drinking water for the household <u>during the rainy season</u> ? PIPED INTO DWELLING.....1 PIPED INTO YARD/PLOT....2 PIPED TO NEIGHBOR.....3 PUBLIC TAP/STANDPIPE...4 TUBE WELL/BOREHOLE.....5 PROTECTED DUG WELL.....6 UNPROTECTED DUG WELL...7 PROTECTED SPRING.....8 (►Q56) UNPROTECTED SPRING.....9 (►Q56) RAIN WATER COLLECTION..10 (►Q56) TANKER TRUCK/WATER VENDOR.....11 WITH SMALL TANK/DRUM...12 (►Q56) SURFACE WATER (RIVER, STREAM, POND, DAMN, CANAL).....13(►Q56) BOTTLED WATER.....14(►Q59) SACHET WATER.....15(►Q59) WATER KIOSK.....16(►Q56) OTHER (SPECIFY).....17(►Q56)	Who is responsible for the provision of the raining season [SOURCE] of drinking water? GOVERNMENT.....1 COMMUNITY.....2 NGO.....3 PRIVATE COMPANY.....4 PRIVATE SELF SUPPLY.....5 RELIGIOUS BODY...6 OTHER (SPECIFY) ..7	Where is this [SOURCE] located? SKIP IF Q33=1, 2, 3 (► Q59) IN OWN DWELLING...1(►Q59) IN OWN YARD/PLOT..2(►Q59) ELSEWHERE...3	How long does it take the household to go to the [SOURCE] used during the rainy season, to get water and come back, including waiting time?	Normally, how many trips per week does the household make to fetch water in the rainy season? SKIP IF Q33=1, 2	
HOURS	HOURS	# OF INTERRUPTIONS	HOURS					TIME	UNIT	# OF TRIPS

SECTION 11: HOUSING

59.	60.	61.	62.	63.	64.	65.	66.	67.	68.
In the dry season, is your household's main source of drinking water different from your main source in the rainy season?	What is the main source of drinking water for members of your household during the dry season?	Who is responsible for the provision of the dry season [SOURCE] of drinking water?	Where is this [SOURCE] located?	How long does it take the household to go to the[SOURCE] used during the dry season, to get water and come back, including waiting time?	Normally, how many trips per week does your household make to fetch water in the dry season?	In the last 30 days, has there been any time when your household did not have sufficient quantities of drinking water when needed?	Do you usually do anything to the water (dry or rainy season) to make it safer to drink?	What do you usually do to the water to make it safer to drink?	What is the main source of water used by members of your household for other purposes, such as cooking and hand washing?
YES..1 NO...2 (► Q65)	PIPED INTO DWELLING....1 PIPED INTO YARD/PLOT...2 PIPED TO NEIGHBOR.....3 PUBLIC TAP/STANDPIPE...4 TUBE WELL/BOREHOLE.....5 PROTECTED DUG WELL.....6 UNPROTECTED DUG WELL...7 PROTECTED SPRING.....8 (►Q62) UNPROTECTED SPRING.....9 (►Q62) RAIN WATER COLLECTION..10 (►Q62) TANKER TRUCK/WATER VENDOR.....11 WITH SMALL TANK/DRUM...12 (►Q62) SURFACE WATER (RIVER, STREAM, POND, DAMN, CANAL).....13(►Q62) BOTTLED WATER.....14(►Q65) SACHET WATER.....15(►Q65) WATER KIOSK.....16(►Q62) OTHER(SPECIFY).....17(►Q62)	GOVERNMENT.....1 COMMUNITY.....2 NGO.....3 PRIVATE COMPANY.....4 PRIVATE SELF SUPPLY.....5 RELIGIOUS BODY..6 OTHER(SPECIFY)..7	SKIP IF Q60=1, 2, 3 (► Q65) IN OWN DWELLING...1(►Q65) IN OWN YARD/PLOT..2(►Q65) ELSEWHERE...3	TIME UNIT MINUTE....1 HOUR.....2		YES.....1 NO.....2	YES.....1 NO.....2 (► Q36)	PROBE & SELECT ALL THAT APPLY BOIL.....1 ADD BLEACH/CHLORINE.....2 STRAIN THROUGH CLOTH.....3 USE A WATER FILTER.....4 SOLAR DISINFECTION..5 LET IT SETTLE..6 OTHER(SPECIFY)..7	PIPED INTO DWELLING....1 PIPED INTO YARD/PLOT...2 PIPED TO NEIGHBOR.....3 PUBLIC TAP/STANDPIPE...4 TUBE WELL/BOREHOLE.....5 PROTECTED DUG WELL.....6 UNPROTECTED DUG WELL...7 PROTECTED SPRING.....8 UNPROTECTED SPRING.....9 RAIN WATER COLLECTION..10 TANKER TRUCK.....11 CART WITH SMALL TANK/DRUM.....12 SURFACE WATER (RIVER, STREAM, POND, DAM, IRRIGATION CHANNEL CANAL).....13 BOTTLED WATER.....14 SACHET WATER.....15 WATER KIOSK.....16 OTHER(SPECIFY).....17
				TIME	UNIT	# OF TRIPS			

69.	36.	70.	71.	72.	73.	74.	38.	75.	
During the past 30 days, how much did you pay for water, including any fees or costs of transportation, delivery, etc for this water?	What kind of toilet facility do members of your household usually use?	Has your (pit latrine or septic tank) ever been emptied?	The last time it was emptied, where were the contents emptied to?	Where is this toilet facility located?	Do you share this facility with others who are not members of your household?	With how many other households do you share this toilet facility?	What is the main kind of refuse collection used by your household during the past 12 months?	How much does your household typically pay for refuse collection?	
ONLY YOUR PORTION IF SHARED WATER BILL	FLUSH TO PIPED SEWAGE SYSTEM.....1 (►Q72) FLUSH TO SEPTIC TANK..2 FLUSH TO PIT LATRINE..3 FLUSH TO OPEN DRAIN...4 (►Q72) FLUSH TO SOMEWHERE ELSE.....5 (►Q72) FLUSH TO UNKNOWN PLACE/NOT SURE/DONT KNOW WHERE.....14 (►Q72) VENTILATED IMPROVED LATRINE.....6 PIT LATRINE WITH SLAB..7 PIT LATRINE W/O SLAB /OPEN PIT.....8 COMPOSTING TOILET...9 BUCKET.....10 (►Q72) HANGING TOILET/ HANGING LATRINE....11 (►Q72) NO FACILITIES, BUSH, OR FIELD.....12 (►Q38) OTHER(SPECIFY).....13 (►Q72)	YES, EMPTIED..1 NEVER.....2 (►Q72) DON'T KNOW....3 (►Q72)	REMOVED USING A TRUCK/TANKER.....1 REMOVED USING A NONMOTORIZED VEHICLE.....2 BURIED IN A COVERED PIT.....3 AN UNCOVERED PIT, OPEN GROUND, WATER BODY OR ELSEWHERE..4 OTHER (SPECIFY).....5	IN OWN DWELLING....1 IN OWN YARD/ PLOT.....2 ELSEWHERE....3	YES.....1 NO.....2 (► Q38)	SHOULD INCLUDE THIS HOUSEHOLD NUMBER	COLLECTED BY GOV..1 COLLECTED BY PRIVATE FIRM.....2 GOVT BIN.....3 DISPOSAL WITHIN COMPOUND (INCL BURNING).....4 (►NEXT SECTION) INFORMAL DISPOSAL BUSH, STREET, WATER).....5 (►NEXT SECTION) OTHER (SPECIFY)...6 (►NEXT SECTION)	TIME UNIT DAILY.....1 WEEKLY.....2 FORTNIGHTLY..3 MONTHLY.....4 QUARTERLY...5 YEARLY.....6	
NAIRA								AMOUNT	TIME UNIT

1. In order for us to be able to contact you in the future, could you kindly provide us with your telephone numbers?

2a. FIRST HOUSEHOLD MEMBER:

NAME : _____

PHONE:_____

2b.SECOND HOUSEHOLD MEMBER. Is there another adult member of the household that can provide us with a phone number for contact?

NAME : _____

PHONE:_____

2c. THIRD HOUSEHOLD MEMBER. Is there another adult member of the household that can provide us with a phone number for contact?

NAME : _____

PHONE:_____

YES...1
NO...2

YES...1
NO...2

3a.If you were to move in the next two years, who are the people in this community who would be most likely to know your new address?

CONTACT INFORMATION FOR **REFERENCE PERSON 1**

3a1. NAME : _____

3a2. RELATION TO HEAD : _____

3a3. PHONE (MOBILE) : _____

3a4. ADDRESS : _____

CONTACT INFORMATION FOR **REFERENCE PERSON 2**

3b1. NAME _____

3b2. RELATION TO HEAD _____

3b3. PHONE (MOBILE) _____

3b4. ADDRESS _____