



# **Center for Economic Development and Administration (CEDA)**

Tribhuvan University  
Kirtipur, Kathmandu

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Endline Survey on Community Challenge Fund

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B.S. 2071 (September 2014 – February 2015)

## **SECTION 1-5 HOUSEHOLD QUESTIONNAIRE**

Time at Start of Visit

Time at End of Visit

**If a CO member household has a pregnant woman or children between the ages of 0d-24m 30d, then the household will be considered eligible. Confirm if this household has pregnant women or children between the ages of 0d-24m 30d, and fill out the information below.**

S.N.	Details of pregnant woman What is the name of the pregnant woman?	Details of children aged 0d —24m 30d				Mother's full name	Details of other children from the same mother who are aged 25m 0d — 36m 30d		
		S.N.	Full name of children aged 0d —24m 30d	Date of birth (YY/MM/DD)	Age (Year/Months/Days)		Full name	Date of birth (YY/MM/DD)	Age (Year/Months/Days)
1		1							
2		2							
3		3							

## SECTION 01: SURVEY INFORMATION

101. Round Number.....

103. CO Code No (see the code sheet) .....

105. SN eligible woman (From listing form).....

107. Date of Interview: ..... Day  Month  Year

109. Name of supervisor \_\_\_\_\_ Code:

111. Name of data entry operator \_\_\_\_\_ Code:

102. Name of CO \_\_\_\_\_

104. House Serial No (Copy from Q5 of Listing Form).....

106. Name of CO Member in Selected HH \_\_\_\_\_

108. Name of enumerator \_\_\_\_\_ Code:

110. Name of Editor \_\_\_\_\_ Code

112. Date and signature of data entry operator \_\_\_\_\_

## SECTION 02: HOUSEHOLD IDENTIFICATION

201. District: (Ramechhap.....1, Sindhuli.....2, Sarlahi...3, Rautahat...4).....


202. Is this a VDC or a Municipality? (VDC...1, Municipality...2)

203. Name and Code of VDC/Municipality (see code sheet) \_\_\_\_\_

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204. Ward Number.....

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205. Name of Tole/village \_\_\_\_\_

206. Name of the respondents and Identity number (HH Roster):

A. Name of the Main Respondent \_\_\_\_\_ ID CODE

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B. Name of the Second Respondent \_\_\_\_\_ ID CODE

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207. Name of the Household Head and code: \_\_\_\_\_

0	1
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208. Caste/ethnicity of HH head \_\_\_\_\_ Code :

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209. Name of the Household Head's Spouse: \_\_\_\_\_

210. Name of person living in house to the left /behind of surveyed HH: \_\_\_\_\_

211. Name of person living in house to the right /in front of surveyed HH: \_\_\_\_\_

212. Result of Interview (fill out after the interview):

A. Type of Survey	B. Result (see Code below)
HH Questionnaire (Section 1-5)	
Women Sections (Section 6-10) – 1 <sup>st</sup> set	
Women Sections (Section 6-10) – 2 <sup>nd</sup> set (if no, write "X")	
ASQ (Woman and Child Section 11) – 1 <sup>st</sup> set	
ASQ (Woman and Child Section 11) – 2 <sup>nd</sup> set (if no, write "X")	
<b>Code for Result</b> Completed ..... 1 HH head, spouse, or eligible woman or other adult not at home.....2 Refused.....3 Dwelling not found/family migrated.....4 Any Other (Specify): .....5	

213. Which religion do you follow mainly in your household?

Hindu.....1  
 Bouddha .....2  
 Islam.....3  
 Kirant.....4  
 Jain.....5  
 Christian.....6  
 Shikh.....7  
 Other.....8

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## SECTION 03: HOUSEHOLD ROSTER

[Respondent: Household head, spouse of household head, or other most knowledgeable adult family members]

I D  C O D E	301. Write down the names of all persons who live and eat together in the HH + members living/working away from home.  (Write down household head's name first.)	302. Relationship to HH head Head.....1 Spouse.....2 Son/Daughter.....3 Grandchild.....4 Parent.....5 Brother/Sister.....6 Nephew/Niece.....7 Son/Daughter-in-law..8 Brother/Sister-in-law..9 Parent-in-law.....10 Other relative (grandparents etc).....11 Domestic helper.....12 Adopted/foster child.13 Other not related.....14	303. Sex  Male....1 Female.2	304. Age (Completed)?  Children< 5 years: current age (in years & months)  Children <1 month: 00  If >99 write 99		Ask only to those who are aged 5 years and older						310. Is [name] currently residing in this HH?  Yes ...1 No....2 (Go to another)	311. Is this child or mother eligible for interview ?  Yes ...1 No....2
						305. Can [NAME] read and write a letter in any one language?  Can read and write .....1 No....2	306. Has [NAME] ever attended formal school/ college?  Yes...1 No....2 →Q308	307. What is the highest grade [NAME] completed?  (Use EDUCATION CODE)	308. Marital status  Unmarried...1 Currently married .....2 Divorced/ Separated...3 Widowed....4	309. What is [NAME's] main and secondary occupation?  (Use OCCUPATION CODE)   OCCUPATION CODE			
				Yr.	Mnth.					Primary	Secondary		
01		01											
02													
03													
04													
05													
06													
07													
08													
09													
10													
11													
12													
13													
14													
15													

## SECTION 04: HOUSING CONDITION AND PHYSICAL ASSETS

**I would like to know more about your housing units used by your household or currently residing.**

401. Is this dwelling unit occupied by your household only?

Yes.....1

No.....2

☐

402. What is the ownership status of the dwelling that your household residing?

Own house (Male ownership).....1

Own house (Female ownership)...2

Own house (Joint ownership).....3

No ownership.....4

Rented.....5

☐

403. What is the main flooring material of the house that your family using?

Earth/mud.....1

Wood/Planks.....2

Stone/Brick .....3

Cement .....4

Other .....5

☐

404. What is the main construction material of the outside wall of the house?

(What is the main binding material of the house?)

Bamboo/Wood/Cement mix (centre wall).....1

Cement bonded Stones/Bricks/Concrete.....2

Mud bonded Stones/Bricks .....3

Wood.....4

Unbaked Bricks.....5

Bamboo and mud .....6

Clay, Husk, Mud, Straw, Hay.....7

Other.....8

No outside walls.....9

☐

405. What is the main construction material of the roof of the house?

Hay/Straw.....1

Earth/Mud .....2

Wood.....3

Galvanized iron.....4

☐

Concrete/Cement.....5

Tiles/Slates/Stone.....6

Other.....7

406. What types of fuel does your household commonly use for cooking and heating?

(Main Three)

Wood.....01

Crop residues (Husk/Straw) .....02

Dung cakes.....03

Charcoal.....04

Coal/cake.....05

Kerosene.....06

Electricity.....07

Liquid Petroleum Gas .....08

Bio Gas .....09

Other (Specify) .....10

No 2nd/3rd answer.....99

A. Main

B. Second

C. Third

☐
☐
☐

**(If none of A, B, or C is 01 go to question 414)**

407. What type of toilet does your household use?

Flush toilet.....1

Covered Pit/Pan within Household Compound.....2

Open Pit within Household Compound .....3

Community Latrine.....4

Other type of Latrine (Specify) .....5

No Toilet/Open Defecation .....6

☐

408. Does your household own land?

Yes.....1, No.....2

☐

409. Has your household owned any livestock?

Yes .....1, No.....2

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## SECTION 05A: FOOD CONSUMPTION

501. Particulars of your food consumption in the past 24 hours (e.g., breakfast, lunch, mid-day snacks, dinner, etc.)

A. Food items	B. How much [QUANTITY] did you consume [FOOD] in in the previous 24 hours? (If none, write 0 and →Next item)	
	Quantity	Unit
01. Rice		
02. Beaten rice		
03. Maize		
04. Wheat		
05. Barley/Oat/Sorghum		
06. Millet/ Buckwheat		
07. Pulses		
08. Gram/Pea		
09. Other beans		
10. Fish		
11. Meat		
12. Egg		
13. Milk		
14. Curd/Whey etc.		
15. Baby/Powder milk		
16. Ghee		
17. Honey		
18. Vegetable ghee		

A. Food items	B. How much [QUANTITY] did you consume [FOOD] in in the previous 24 hours? (If none, write 0 and →Next item)	
	Quantity	Unit
19. Oil (Mustard, Soyabean, etc.)		
20. Potato/Colocasia		
21. Onion		
22. Green leafy vegetables		
23. Other vergetables (cauliflower, okra, etc)		
24. Fruits/nuts		
25. Salt		
26. Other Spices (scumin seed, marich, garlic, ginger, chillies, etc.)		
27. Sugar		
28. Sakhar/Gud/Khudo		
29. Sweets		
30. Tea/Coffee		
31. Alcoholic beverages (Jand, Wine, Beer, etc.)		
32. Non-alcoholic beverages (Coke, Frooti, Sarbat, etc.)		
33. Tobacco and tobacco products		
34. Noodles and Biscuits		
35. Other Foods		

*Unit Code: Kilogram.....01, Gram.....02, Litre.....03, ml.....04, Pathi.....05, Mana.....06, Karuwa.....07, Number.....08, Dozen.....09, Spoons...10*

## SECTION 5B: EARTHQUAKE ASSESSMENT

I would like to know more about the effects of the recent earthquake on your family and your village.

502. During the recent earthquakes, did you suffer any property damage?

Yes.....1

No.....2→Q504

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503. Was your home destroyed?

Yes.....1

No.....2

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504. Were you displaced from your home for any period of time?

Yes.....1

No.....2

☐

505. For how many days?

☐

506. Did any members of your family die?

Yes.....1

No.....2

☐

507. Did any anyone in your village die?

Yes.....1

No.....2

☐

508. Did any organizations come to your village to help with cleaning up and repairing homes?

Yes.....1

No.....2

☐

509. What types of organizations?

Local aid.....1

Aid from elsewhere in Nepal.....2

Aid from abroad .....3

510. Was the water you drink affected by the earthquake?

Yes.....1

No.....2

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511. Was the food you eat affected by the earthquake?

Yes.....1

No.....2

☐

512. Did you receive any remittances following the earthquake?

Yes.....1

No.....2→Q601

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513. How much were the remittances (to the nearest R10)?

Amount

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