THE HUNGER PROJECT (THP)
INSTITUTE OF STATISTICAL, SOCIAL & ECONOMIC RESEARCH (ISSER)
HOUSEHOLD QUESTIONNAIRE

BASELINE SURVEY 2008

IDENTIFICATION

VILLAGE NAME _____

NAME OF HOUSEHOLD HEAD _____

CLUSTER NUMBER . . . . . [ ][ ][ ][ ]

STRUCTURE NUMBER . . . . . [ ][ ][ ][ ]

HOUSEHOLD NUMBER . . . . . [ ][ ][ ][ ]

DISTRICT . . . . . [ ][ ]

GPS LOCATION _____

LARGE CITY/SMALL CITY/TOWN/RURAL . . . . . [ ]
(LARGE CITY=1, SMALL CITY=2, TOWN=3, RURAL=4)

NAME AND LINE NUMBER OF RESPONDENT _____ [ ][ ]

INTERVIEWER VISITS

	1	2	3	FINAL VISIT
DATE	_____	_____	_____	DAY [ ][ ]
				MONTH [ ][ ]
				YEAR 2 0 0 8
INTERVIEWER'S NAME	_____	_____	_____	INT. NUMBER [ ][ ]
RESULT*	_____	_____	_____	RESULT [ ]
NEXT VISIT: DATE	_____	_____		TOTAL NUMBER OF VISITS [ ]
TIME	_____	_____		

*RESULT CODES:
1 COMPLETED
2 NO HOUSEHOLD MEMBER AT HOME OR NO COMPETENT RESPONDENT AT HOME AT TIME OF VISIT
3 ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD OF TIME
4 POSTPONED
5 REFUSED
6 DWELLING VACANT OR ADDRESS NOT A DWELLING
7 DWELLING DESTROYED
8 DWELLING NOT FOUND
9 OTHER _____ (SPECIFY)

TOTAL NUMBER IN HOUSEHOLD [ ]

SUPERVISOR	FIELD EDITOR	OFFICE EDITOR	KEYED BY
NAME _____	NAME _____	[ ][ ]	[ ][ ]
DATE _____ [ ][ ]	DATE _____ [ ][ ]		

Section 1 -- MEMBERS OF THE HOUSEHOLD

Fill out for all household members

Household member Name	1 Member ID	2 Sex (Male = 1; Female = 2)	3 What is [name's] relationship with head of household? 1= Head 2=Spouse (wife/husband) 3=Child (son/daughter) 4=Grandchild 5=Parent/parent-in-law 6=Son/daughter-in-law 7=Other relative 8=Adopted/foster/ stepchild 9=Househelp 10=Non-relative	4 What is [name's] date of birth? (if not available code DD = 99 MM = 99 Year = 9999) DD	MM	Year	5 How old is [name]? (years and months if under 5, otherwise only years) *(if less than 12 years >> 10)* Years	Months	If 12 years or older, 6 What is [name's] current marital status? 1=married, 2=consensual union, 3=separated (>> 9) 4=divorced (>> 9) 5=widowed (>> 9) 6=never married (>> 10)	7 Does [name's] spouse live in house-hold? Yes = 1 No = 2 (>> 9)	8 If spouse is in HH, spouse's ID (if more than one spouse, the first one)	9 At what age did [name] first get married or start living with a partner?	10 What is [name's] religious denomination? 1=Catholic 2=Anglican 3=Presbyterian 4=Methodist 5=Pentecostalist 6=Spiritualist 7=Other Christian 8=Muslim 9=Traditional 10=No religion	11 In what region/country was [name] born? 1=Western 2=Central 3=Gt. Accra 4=Volta 5=Eastern 6=Ashanti 7=Brong Ahafo 8=Northern 9=Upper East 10=Upper West 96=Other ECOWAS 97=Africa other than ECOWAS 98=Outside Africa
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Section 1, PAGE 2 -- MEMBERS OF THE HOUSEHOLD (continued)

Fill out for all household members

Member ID	12	13		14	15	16	17	18	19	20	Ethnic group codes
	What is [name's] nationality? 1= Ghanaian (birth) 2=Ghanaian (naturalized) 3=Burkinabe 4=Malian 5=Nigerian 6=Ivorian 7=Togolese 8=Liberian 9=Other ECOWAS 10=Other African 11=Other (specify)	To what ethnic group does [name] belong?		Does [name's] father live in house-hold? Yes = 1 No = 2 (>> 16)	ID of Father (>> 18)	What was [name's] father's highest education level completed? 1=None 2=Primary 3=Middle/JSS 4=Voc/Comm 5='O' level 6=SSS 7='A' level 8=Training college 9=Tech/prof 10=Tertiary 11=Koranic 12=Don't know	What kind of work has [name's] father done for most of his life? 1=Professional/technical 2=Administrative/managerial 3=Clerical 4=Sales 5=Service 6=Agric./Ani-Husb./Forest/Fishing/Hunting 7=Production & related works 8=Workers NEC 9=Homemaker 10=Other (specify)	Does [name's] mother live in house-hold? Yes = 1 No = 2 (>> 20)	ID of Mother (>> 22)	What was [name's] mother's highest education level completed? 1=None 2=Primary 3=Middle/JSS 4=Voc/Comm 5='O' level 6=SSS 7='A' level 8=Training college 9=Tech/prof 10=Tertiary 11=Koranic 12=Don't know	1=Asante 2=Akwapim 3=Fanti 4=Akyem 5=Kwahu 6=Ga 7=Other Dangme 8=Krobo 9=Ewe 10=Guan 11=Nzema 12=Hausa 13=Dagomba 14=Mamprusi 15=Gonja 16=Grussi/ Frafra 17=Dagati 18=Kusasi 19=Kassena-Nankani 20=Kankoma 21=Nanumba 22=Builsa 23=Other (specify)
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Section 1, PAGE 3 -- MEMBERS OF THE HOUSEHOLD (concluded)

Fill out for all household members

Member ID	21 What kind of work has [name's] mother done for most of her life? 1=Professional/technical 2=Administrative/managerial 3=Clerical 4=Sales 5=Service 6=Agric./Ani-Husb./Forest/Fishing/Hunting 7=Production & related works 8=Workers NEC 9=Homemaker 10=Other (specify)	22 For how many months has [name] been away from this household? (if 6 months or less, >> 24)	23 While absent, is/was [name] a member of another household? (including single-person household?) 1=Yes 2=No
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Section 2 (Education), Part a -- GENERAL EDUCATION

Fill out for all household members

Member ID	ID of person interviewed	1 Has (NAME) ever attended school? Yes = 1 No = 2 (>> Part 2C)	2 What was the highest grade successfully completed? (see grade codes)	3 What was the highest educational qualification attained? (see qualification codes)	4 Did (NAME) attend school / college at any time during the past 12 months? Yes = 1 No = 2 (>> Part 2B)	5 Is (NAME) still in school? Yes = 1 No = 2 (>>12)	6 Name of school and code (if on village roster, otherwise code NV if not on roster) name	7 ID	8 Is the school (NAME) attending Public or Private? Public = 1 Private religious = 2 Private non-religious = 3	9 What is the current grade? (see grade codes)	10 How much time does (NAME) spend going to and from school daily? IF IN A BOARDING SCHOOL CODE HRS … 00 MINS … 00 HRS	MINS	11 What mode of transportation does (NAME) use to go to school? (if boarding, how does (NAME) get there?) 1 = walk 2 = bicycle 3 = car 4 = bus 5 = train 6 = boat 7 = animal 8 = other (specify)
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QUALIFI-CATION CODES
None = 01
MSLC = 02
BECE = 03
Voc/Comm = 04
Teacher Tra. A = 05
Teacher Post Sec = 06
GCE O Level = 07
SSCE = 08
GCE A Level = 09
Tech/Prof. Cert = 10
Tech/Prof Dip = 11
HND = 12
Bachelor = 13
Masters = 14
Doctorate = 15
Other = 16 (specify)

GRADE LEVEL CODES
None = 0
Pre-school = 01
P1 = 11
P2 = 12
P3 = 13
P4 = 14
P5 = 15
P6 = 16
JSS1 = 17
JSS2 = 18
JSS3 = 19
M1 = 20
M2 = 21
M3 = 22
M4 = 23
SSS1 = 24
SSS2 = 25
SSS3 = 26
S1 = 27
S2 = 28
S3 = 29
S4 = 30
S5 = 31
L6 = 32
U6 = 33
Voc/Technical/Computer/Comm/Agric = 41
Teacher Train = 42
Nursing = 43
Polytechnic = 51
University = 52
Other tertiary = 53
Other = 61 (specify)

Section 2, Part a -- GENERAL EDUCATION (continued)

Fill in this whole sheet with data from GLSS5; fill out whole sheet for new household members 3 years of age and older

Member ID	ID OF PERSON INTERVIEWED	12	13	14		15		16		17		18		19		20		21		22		23		24	25	26	
		How many hours of class did (NAME) attend last week? (exclude extra classes) vacation code 99	How many hours of class did (NAME) miss last week? (exclude extra classes) vacation code 99	How many hours and minutes of homework did (NAME) do last week?		I want to ask you about the educational expenses for (NAME) during the past 12 months. How much was spent on…. (AMOUNT IN CEDIS and PESEWA) School fees and regis-tration fees?		Contri-butions to parent/ teacher assoc-iation (PTA)?		Uniforms and sports clothes?		Books and school supplies?		Trans-portation to and from school?		Food, board, and/or lodging at school?		Expenses on extra classes?		In-kind expenses?		TOTAL (IF CANNOT BREAK DOWN)		Who paid for most of the educational expenses? Father = 1 Mother = 2 Both parents = 3 Other HH member = 4 Other relative = 5 Non-relative = 6 Self = 7 Other = 8	Did (NAME) have a scholarship / bursary during the past 12 months? Yes = 1 No = 2 (next person)	What was the amount of the scholarship / bursary received for the past 12 months?	
		hours	hours	HRS	MINS	GH¢	P	GH¢	P	GH¢	P	GH¢	P	GH¢	P	GH¢	P	GH¢	P	GH¢	P	GH¢	P			GH¢	P
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Section 2, part a -- GENERAL EDUCATION (concluded)

NEW -- fill out this sheet for students currently in school

Member ID	27	28	29	30	31
	Does (NAME) have all the textbooks needed for school? 1 = yes, has all 2 = has some, but not all 3 =has none	How does (NAME) obtain the textbooks? 1 = provided by school, can take home 2 = provided by school, cannot take home 3 = newly purchased from the school 4 = newly purchased from private market 5 = gift 6 = passed down from older sibling 7 = purchased us	Does (NAME) participat e in a feeding program at school? 1 =yes 2 = no	What kinds of meals or snacks does (NAME) receive at school? 1 = breakfast 2 = snack 3 = lunch 4 = other (specify) *(separate multiple responses with commas)*	How many times a week does (NAME) receive this food?
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Section 2, part b -- EDUCATIONAL CAREER

NEW -- fill out whole sheet for all current household members ages twelve and older

ID	1 Has (NAME) ever repeated / did (NAME) ever repeat a grade? 1 = yes 2 = no	2 Has (NAME) ever / did (NAME) ever skip a grade? 1 = yes 2 = no	3 How many times has (NAME) skipped / did (NAME) skip a grade?	4 If (NAME) ever attended a secondary institution, what was (NAME)'s major field(s) of study? *(list one or more codes)* 1 = science 2 = general arts 3 = business 4 = visual arts 5 = home economics 6 = technical science 7 = agricultural science 8 = humanities 9 = social science 10 = engineering 11 = medicine 12 = law 13 = education 14 = other (specify)
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Language codes

English = 1
Twi/Fanti = 2
Ewe = 3
Ga-Dangme = 4
Dagbani = 5
Frafra/Grusi = 6
Nzema = 7
Wali/Dagari = 8

French = 10
German = 11
Spanish = 12
Portuguese = 13
Chinese = 14
Japanese = 15

Other = 78(specify)

Section 2, part c -- LITERACY AND APPRENTICESHIP

Fill out for all household members 5 years and older

Household ID	1	2	3	4	5	6	7	8	9	10	11		12		13	14	15	16
	Can (NAME) read a phrase/ sentence in English? (SHOW FLASH CARD) 1 = Yes 2 = No	In what Ghanaian language can (NAME) read a phrase/ sentence? (SHOW FLASH CARD) State the one in which (NAME) is most proficient *(see language codes below)*	Can (NAME) write a sentence in English? Yes = 1 No = 2	In what Ghanaian language can (NAME) write a phrase/ sentence? State the one in which (NAME) is most proficient *(see language codes below)*	What languages does (NAME) **speak** comfortably? (*list all - see language codes below*)	Can (NAME) do written calc-ulations? (USE FLASH CARDS) Yes = 1 No = 2	Has (NAME) ever attended a literacy course? Yes = 1(>>9) No = 2	If not attending/ attended, why? Low quality = 1 Not available = 2 Do not need = 3 Too costly = 4 Takes much time = 5 Not useful = 6 Too far = 7 Spouse does not want = 8 Other = 9 (specify) >>10	For how many months has (NAME) been attending / attended a literacy course? MONTHS	Is (NAME) or has (NAME) ever been an apprentice? Yes, currently = 1 Yes, in past = 2 No = 3 (if no >> 15)	How long (is) the apprentice-ship? YRS	MTHS	What is the main trade (NAME) is learning? (REFER TO SECTOR TRADE/SKILLS GLSS CODE BOOK) MAIN TRADE	CODE	Did (NAME) pay a fee for this training? Yes, in kind = 1 Yes, in cash = 2 Both = 3 No = 4 (>>14)	How much did (NAME) pay for the training?	Has (NAME) ever attended other short training courses lasting not more than 6 months? Yes = 1 No = 2 (>>Next member)	What was the main subject of the most recent training? (see codes below)
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LANGUAGE CODES: *Ghanaian codes* : None = 1; Twi/Fanti = 2; Ewe = 3; Ga-Dangme = 4; Dagbani = 5; Frafra/Grusi = 6; Nzema = 7; Wali/Dagari = 8; Other = 9 (specify)

Other language codes : French = 10; German = 11; Spanish = 12; Portuguese = 13; Chinese = 14; English = 15 ;

APPRENTICESHIP CODES: Carpentry = 1; Masonry = 2; Tailoring = 3; Blacksmithing = 4; Mechanical = 5; Electronics/Electricals = 6; Painting/Spraying = 7; Other (specify) =8

Section 3 (Health), part a -- HEALTH IN LAST TWO WEEKS

Fill out for all household members

ID	1 During the last 2 weeks has (NAME) suffered from either illness or injury? Neither ...1 (>>8) Illness …. 2 Injury …. 3 (>>5) Both …. 4	2 What was the illness that (NAME) suffered? Fever…1 (>>5) Diarrhea with blood…2 (>>5) Watery Diarrhea…3 (>>3) Cold / Cough…4 (>>5) Guinea Worm…5 (>>5) Bilharzia…6 (>>5) Other…7 (>>5)	3 Was (NAME) given the same amount to drink as before the watery diarrhea, or more, or less? 1 = same 2 = more 3 = less	4 Was (NAME) given any of the following to drink: *(list all that apply, separating responses with commas)* 1 = Oral Rehydration salt (ORS) 2 = Rice water 3 = Soup 4 = Home-made sugar/ saltwater solution 5 = Milk or infant formula 6 = Coconut water 7 = Water 8 = herbs 9 = Other (specify)	5 For how many days during the last 2 weeks has (NAME) suffered from this condition? (1 - 14) DAYS	6 During the last 2 weeks, did (NAME) have to stop the usual activities because of this condition ? Yes … 1 No … 2 (>> 8)	7 For how many days? (1 - 14) DAYS	8 During the last 2 weeks has (NAME) consulted <u>any</u> health facility? Yes ...1 No … 2 (>>19)	9 On the most recent visit whom did (NAME) consult? Doctor … 01 Dentist … 02 Nurse … 03 Medical Asst … 04 Midwife … 05 Pharmacist … 06 Drug/Chemical Seller … 07 Trad. Healer … 08 Trained TBA … 09 Untrained TBA … 10 Spiritualist … 11 Other … 12	10 What was the main reason for the most recent visit? Illness … 1 Injury … 2 Follow-up … 3 Check-up… 4 Prenatal care … 5 Postnatal care … 6 Vaccination … 7 Other … 8 (specify)	11 Where did the consultation take place? Hospital … 1 Clinic … 2 MCH Clinic … 3 Maternity Home … 4 Pharmacy … 5 Chemical store … 6 Consultant's Home … 7 Patient's Home … 8 Community epicenter … 9 Other (specify) … 10
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Section 3, Part a -- HEALTH IN LAST TWO WEEKS continued

Fill out for all household members

12	13	14	15	16		17		18	
What was the name of the facility? *(enter name and code if in village or code NV if not in village)*		Is this a public or private facility? Public … 1 Private … 2 Private non-religious … 3	How much did (NAME) pay for this consultation? cedis and pesewas	How much did (NAME) pay to travel there and to return? cedis and pesewas		How much time did it take to travel to and from the facility? TRAVEL TIME		How long did you have to wait at the health facility before being attended to by a health officer? WAITING TIME	
NAME	CODE			GH¢	P	HRS	MINS	HRS	MINS

Section 3, part a -- HEALTH IN LAST TWO WEEKS concluded

Fill out for all household members

ID	19 During the last 2 weeks did (NAME) buy any medicine or medical supplies? Yes … 1 No … 2 (>>23)	20 How much did (NAME) pay altogether for these medicine and medical supplies? (AMOUNT)	21 Total medical expenses over the past two 2 weeks (IF CANNOT GIVE BREAKDOWN)	22 Were the medicine/ medical supplies available/ obtainable in the same place? Yes … 1 No … 2	23 For the past 12 months was (NAME) hospitalized for any illness or injury? Yes … 1 No … 2	24 Who pays for the greatest portion of the health expenses incl. consultations and hospital stays (if any)? Household member … ID Other relative … 80 Government … 81 Employer … 82 Household member's employer … 83 Health insurance … 84 Other … 85 (specify)
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Section 3, part b – PREVENTATIVE HEALTH – IMMUNIZATIONS

Fill out for all household members

ID	1	2												3	4		5
	Has (NAME) ever been immunized ? Yes … 1 No … 2 (if no >> 5)	Has (NAME) ever received the following vaccines? 1 = yes; 2 = no; 3 = don't know; 4 = not applicable COPY FROM IMMUNIZATION BOOK / (WEIGH -IN) CARD IF AVAILABLE IF ALL ANSWERS EQUAL 3 AND/OR 4>>> PART 3C **Type of immunization**													Did you have to pay any fee for these immunizations? Yes .. 1 No … 2 (Next person)	How much was paid? (cedis and pesewas) >> NEXT PERSON		Why was (NAME) not immunized? Too young .. 1 Don't know (NAME) had to … 2 Health center too far … 3 Shortage of supply … 4 Other … 5 (specify)
		BCG	POLIO					DPT			FIVE IN ONE	MEASLES	VITAMIN 'A'	YELLOW FEVER		GH¢	P	
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Section 3 part c – Child Health / Postnatal care

Fill out for children that are 5 and under

ID	ID of person interviewed	1 Did you or someone else take [name] to a health center for a post-natal care in the past 12 months 1 = yes 2 = no (>> 5)	2 How many times did [name] go there for consultations in the past 12 months?	3 Did you have to pay for consultations ? 1 = yes 2 = no (>> 5)	4 How much do you usually pay for one consulation? (cedis and pesewas) Do not include medical supplies	5 Does (or did) the mother breastfeed ? (NAME) 1 = yes 2 = no (>> 9)	6 At what age did (NAME) receive any liquid (except water) other than breastmilk for the first time? REPORT IN MONTHS 87 = not yet	7 At what age was (NAME) first given water? 87 = not yet	8 At what age did (NAME) receive any food other than breastmilk for the first time? REPORT IN MONTHS 87 = not yet	9 Does (NAME) participate in a community feeding program? 1 = yes 2 = no	10 Who usually looks after (NAME) during the daytime? 1 = mother 2 = adult male 3 = adult female 4 = male child 5 = female child 6 = creche 7 = other (specify)
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Section 3, part c – Child Health / Development

NEW -- complete for all children in household ages 9 and younger

ID	ID of Person Interviewed	11 Does (NAME) attend any organized learning or early childhood education programme, such as a private or government facility, including kindergarten or community child care? Yes … 1 No … 2	12 In the last 7 days, how many hours did (NAME) attend?
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Section 3, part d – Fertility and Prenatal care

Fill out for all women ages 12-49

ID	1 Have you ever been pregnant? Yes … 1 No … 2 (if no >> 27)	2 Have you ever given birth to a child? Yes…1 No…2 (>>9) IF NO, PROBE: Even one who lived only a few hours or less?	3 How many girls have you given birth to? GIRLS	4 How many boys have you given birth to? BOYS	5 I would like to make sure you have given birth to … TOTAL NUMBER OF CHILDREN (Q.3 + Q.4)	6 How many girls are still alive? GIRLS	7 How many boys are still alive? BOYS	8 I would like to make sure you have total number of …. Children alive? TOTAL NUMBER OF CHILDREN ALIVE (Q.6 + Q.7)	9 Did you have any pregnancy which did not end in a live birth? Yes … 1 No … 2 (>>11)	10 How many of those pregnancies did not end in a live birth? NON-LIVE BIRTHS
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Section 3, part d – Fertility and Prenatal Care

Complete entire sheet for women ages 12-49

ID	11	12	13	14	15	16	17	18	19	20	21	22
	Are you pregnant now? Yes … 1 (>>16) No … 2	During the past 12 months have you been pregnant? Yes … 1 No … 2 (if no >> 23)	How did this pregnancy end? Live birth … 1 Still birth … 2 (7+ months) (>>16) Mis-carriage … 3 (>>16) Other … 4 (specify) (>>16)	Is that child still alive? Yes … 1 No … 2 (>>16)	Are you now breastfeeding? Yes … 1 No … 2	During this pregnancy did you receive any pre-natal care? Yes ... 1 No … 2 (>>22)	How old was your pregnancy when you first received prenatal care? WEEKS	From where did you receive that care? Prenatal clinic (private) … 1 Prenatal clinic (public) … 2 Hospital … 3 Maternity Home … 4 Home of practitioner … 5 Community epicenter … 6 Other … 7 (specify)	From whom did you receive that care? Doctor … 01 Nurse … 02 Medical Asst … 03 Midwife … 04 Pharmacist … 05 Chemical Seller … 06 Trad Healer … 07 Trained TBA … 08 Untrained TBA … 09 Spiritualist … 10 Other … 11 (specify)	How many times did you go there?	How much did you pay for the first prenatal consultation? >> 23 AMOUNT	Why didn't you go for prenatal care? Can't afford … 1 No health care available … 2 Health care too far … 3 Not necessary … 4 Other … 5 (specify)
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Section 3, part d – Fertility / Women's Health

NEW -- complete for all women in household ages 12 to 49

ID	23		24	25	26	27	28	29	30	31	32	33	34
	How many years/ months have passed since your last child?		After your last child, how many months passed before you resumed sexual relationships?	How many months passed before your period came back?	For how many months did you breastfeed?	How old were you when you first had intercourse?	How old were you when your first child was born?	How old were you at your first menstruation?	Do you still have menstruation ?	How old were you when you stopped menstruating?	If still menstruating, have you gone more than three months without menstruating one or more times in the past year?	[If married], Has your husband beat you in the past year?	If yes, how many times?
	years	months	Not yet …87	Not yet …87	Still breast feeding …87			Not yet …87	Yes … 1 (>>32) No … 2	(>>33)	1 = yes 2 = no	1 = yes 2 = no (>>part 3e) 87 = not married	1=Once 2=A few times 3=Many Times 4=Every day
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Section 3, part e -- Contraceptive use and HIV/AIDS awareness

Complete entire sheet for household members ages 12 and older

ID	1 Are you or your partner using any method to prevent or delay pregnancy? Yes … 1 No … 2 (>>6)	2 What main method are you using? Pill … 01 Male condom … 02 Female condom … 03 IUD … 04 Injection … 05 Female sterl … 06 Male sterl … 07 Implants … 08 Foam/Jelly … 09 LAM … 10 Abstinence … 11 Rhythm … 12 Withdrawal … 13 Other … 14 (specify) IF Q=10 - 14 >> 8)	3 Is your partner aware that you are using this method of contraception?	4 IF Q.2 = 01 TO 09, ASK: How much did you pay for that during the last month? AMOUNT	5 If Q.2 = 01 TO 09, ASK: Where did you get the method? Prenatal clinic (private) … 1 Prenatal clinic (public) … 2 Hospital … 3 Maternity home … 4 Home of practitioner … 5 Pharmacy/Chemist/Drug store .. 6 Community epicenter … 7 Other … 8 (specify)	6 Why are you not using any contraceptive method? *See codes at right*	7 Do you think you will use a contraceptive method to delay or avoid pregnancy in the future? Yes, Delay/Avoid Pregnancy … 1 Yes Other reason … 2 No … 3 Don't know … 4 (>>8)	8 Which main contraceptive would you prefer to use? *See codes at right*
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								

CODES FOR QUESTION 6

Not married … 11

Fertility-related reasons

Infrequent sex / no sex … 22
Menopausal/Hysterectomy … 23
Wants as many children as possible … 26

Opposition to use

Respondent opposed … 31
Husband opposed … 32
Religious prohibition ... 34

Lack of knowledge

Knows no method ... 41
Knows no source ... 42

Method-related reasons

Health concerns ... 51
Fear of side effects ... 52
Lack of access / too far ... 53
Costs too much ... 54
Inconvenient to use ... 55
Interferes with body's normal processes ... 56
Other (specify) ... 96
Don't know ... 98

CODES FOR QUESTION 8

Pill … 01
Male condom … 02
Female condom … 03
IUD … 04
Injectibles … 05
Female sterilization … 06
Male sterilization … 07
Implants … 08
Foam/Jelly … 09
Lactational Amen. Method … 10
Periodic abstinence … 11
Withdrawal … 12
Diaphragm ... 13
Other (specifiy) ... 96
UNSURE ... 98

Section 3, part e -- Contraceptive use and HIV/AIDS awareness (concluded)

Complete entire sheet for household members ages 12 and older

ID	9	10			11	12	13	14	15	16
	Now I would like to talk to you about something else. Have you ever heard of an illness called HIV/AIDS? Yes … 1 No … 2 (>> Next Person)	What can people do to prevent HIV/AIDS (UP TO 3 MAIN WAYS) *see codes at right*			Is it possible for a healthy-looking person to have the AIDS virus? Yes … 1 No … 2 Don't know … 8	Can the virus that causes AIDS be transmitted from a mother to child? Yes … 1 No … 2 (>>14) Don't Know … 3 (>>14)	If yes, by what means? During pregnancy … 1 During delivery … 2 During breastfeeding … 3 Other……4	What would you do to prevent yourself from being infected with the virus that causes AIDS? Abstain from sex … 1 Be faithful to partner … 2 Have safe sex … 3 Use a condom … 4 Other … 5 (specify)	Do you know anyone that has died of AIDS in the past year? 1 = yes 2 = no	If yes, how many people?
		1st	2nd	3rd						
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										

CODES FOR QUESTION 10

Abstain from sex … 01
Use condom … 02
Limit sex to one partner/stay faithful to one partner … 03
Limit number of sexual partners … 04
Avoid sex with prostitutes … 05
Avoid sex with persons who have many partners … 06
Avoid sex with homosexuals ... 07
Avoid sex with persons who inject drugs intravenously ... 08
Avoid blood transfusions ... 09
Avoid injections ... 10
Avoid sharing razors/blads ... 11
Avoid kissing ... 12
Avoid mosquito bites ... 13
Seek protection from traditional practioner ... 14
Other (specify) ... 96
Don't know ... 98

Section 3, part f --ACTIVITIES OF DAILY LIVING

NEW -- fill out for all household members ages 10 and older

ID	ID of Person Being Interviewed	1	2		3	4		5	6	
		If (NAME) had to carry a heavy load for 20 meters *without any help* , could he/she do it? 1 = easily (>>3) 2 = with difficulty 3 = not at all	How long has (NAME) had difficulty / been unable to do this? YRS	MOS	If (NAME) had to walk for 5 km without any help, could he/she do it? 1 = easily (>>5) 2 = with difficulty 3 = not at all	How long has (NAME) had difficulty / been unable to do this? YRS	MOS	If (NAME) had to bend, kneel, or stoop without any help, could he/she do it? 1 = easily (>>7) 2 = with difficulty 3 = not at all	How long has (NAME) had difficulty / been unable to do this? YRS	MOS
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
20										
21										

Section 3, part g – Miscellaneous Health

NEW -- fill out for all household members ages 10 and older

ID	7 In general, how would you rate your health? 1="Very healthy" 2="Somewhat healthy" 3="Somewhat unhealthy" 4="Unhealthy"	8 Are you currently registered or covered with a health insurance scheme? Yes registered … 1 Yes covered … 2 No … 3	9 Do you own a bed net? 1 = yes 2 = no (>>11)	10 How often do you use it? 1 = never 2 = rarely 3 = sometimes 4 = often 5 = always	11 Have you ever had any sores or irritations on the feet that took more than four weeks to heal? 1 = yes 2 = no	12 In the past 3 months, have you had numbness or tingling in the hands or feet, other than numbness /tingling from hands or feet falling asleep, foot aches or long walks? 1 = yes 2 = no	13 Have you ever had the habit of chewing tobacco, smoking a pipe, smoking self-rolled cigarettes, or smoking cigarettes/ cigars? 1 = yes 2 = no (>>31)	14 At what age did you begin this habit? AGE IN YEARS	15 Do you still smoke, or have you completely quit? 1= still smokes (>>25) 2 = has quit	16 How long ago did you quit? YEARS	17 In one day how many cigars/ cigarettes did you consume now/before totally quitting?	18 In the past 12 months, have you tried to stop smoking? 1 = yes 2 = no	19 Would you like to quit smoking sometime in your life? 1 = yes 2 = no (>>23)	20 If so, when? DO NOT PROMPT: 1 = In the next 30 days 2 = In the next year 3 = In the next 5 years 4 = Later 5 = When I get sick	21 Will you actually quit smoking in the next 6 months? 1 = yes 2 = no	22 Are you <u>so</u> addicted to smoking that you will need some sort of help to quit? 1 = yes 2 = no	23 How many days in one week do you consume alcoholic beverages?
1																	
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	
11																	
12																	
13																	
14																	
15																	
16																	
17																	
18																	

Section 3, part h – ANTHROPOMETRY

NEW -- fill out for all household members

ID	1	2	3	4	5		6	7	8	9
	Name of Household Member	Was (NAME) measured? 1 = yes 2 = no	If not, why not? 1 = not home during survey period 2 = too ill 3 - handicapped or deformed 4 = not willing 5 = other (specify)	Was height measured standing of lying down? 1 = standing 2 = lying down	Height		Weight	Hip Size	Waist Size	Arm circumference (mid-upper arm)
					MTRS	CM	KGS	CM	CM	CM
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										

Section 4, part a -- Occupation in past 12 months

Complete entire sheet for new household members ages 7 and older

Member ID	ID of Person Interviewed	1 How many jobs have you held in the past 12 months?	2 Please list in order the four that where you earned the most money	3 What was your position at each job?	4 How much money did you earn at each position per week on average?	5 How many weeks were you working this job?	6 Were you entitled to free or subsidized medical care on this job? Yes =1 No=2	7 On average, how many hours per week was this job?	8 In an average week, how many days do you work? days
1			[1]						
			[2]						
			[3]						
			[4]						
2			[1]						
			[2]						
			[3]						
			[4]						
3			[1]						
			[2]						
			[3]						
			[4]						
4			[1]						
			[2]						
			[3]						
			[4]						
5			[1]						
			[2]						
			[3]						
			[4]						
6			[1]						
			[2]						
			[3]						
			[4]						
7			[1]						
			[2]						
			[3]						
			[4]						
8			[1]						
			[2]						
			[3]						
			[4]						
9			[1]						
			[2]						
			[3]						
			[4]						
10			[1]						
			[2]						
			[3]						
			[4]						
11			[1]						

			[2]						
			[3]						
			[4]						
12			[1]						
			[2]						
			[3]						
			[4]						
13			[1]						
			[2]						
			[3]						
			[4]						
14			[1]						
			[2]						
			[3]						
			[4]						
15			[1]						
			[2]						
			[3]						
			[4]						
16			[1]						
			[2]						
			[3]						
			[4]						
17			[1]						
			[2]						
			[3]						
			[4]						
18			[1]						
			[2]						
			[3]						
			[4]						

TIME UNIT CODES: 1 = daily; 2 = weekly; 3 = fortnightly; 4 = monthly; 5 = quarterly; 6 = yearly

Section 4, part b - Time use

Fill in for all household members ages 7 and older

How much time on a **typical working day** do you spend on any of the following activities for the household?

	1		2		3		4		5		6		7		8		9		10	
	Collecting firewood (if none, move to next activity)		Fetching water (if none, next activity)		Cleaning and upkeep of dwelling. Including washing clothing (if none, next activity)		Cooking and preparing food (if none, next activity)		Taking care of the sick or elderly (if none, next activity)		Caring for children – while not doing any other activity (if none, next activity)		Helping with homework, teaching, reading, etc. (if none, next activity)		Other activities (e. g. playing outside, giving a bath) (if none, next activity)		Leisure Activities such as reading newspapers, books, or magazines. Listening to the Radio or Watching TV. (if none, next activity)		Sleeping (if none, next section)	
	hours	minutes	hours	minutes	hours	minutes	hours	minutes	hours	minutes	hours	minutes	hours	minutes	hours	minutes	hours	minutes	hours	minutes
1																				
2																				
3																				
4																				
5																				
6																				
7																				
8																				
9																				
10																				
11																				
12																				
13																				
14																				
15																				
16																				
17																				
18																				

Section 5, part a - Migration

Complete entire sheet for all household members ages 7 and older

Household Member	ID of person interviewed	1	2		Where was [name] born? In Ghana 3	In Ghana 4	Outside of Ghana 5	When [name] first moved to this village, 6			7			8		
		Was [name] born in this village or town? 1 = Yes (>> next person) 2 = No	How long ago did [name] last move/return to this place? Years	Months	COMMUNITY: 1 = Kumasi 2 = Sunyani 3 = Cape Coast 4 = Koforidua 5 = Accra 6 = Tamale 7 = Bolgatanga 8 = Koforidua 9 = Wa 10 = Sekondi-Takordi 11 = Ho *Other = Write In	REGION: 2=Western 3=Central 4=Gt. Accra 5=Volta 6=Eastern 7=Ashanti 8=Brong Ahafo 9=Northern 10=Upper East 11=Upper West	COUNTRY (write in)	If anyone (HH member or other village resident) other than him/herself helped [name] get his or her first job in this village, who was this person? *List HH ID or name and person ID; or code NV if this person does not appear on the village roster* name	HH ID	Person ID	If [name] worked for a specific person just after arriving in this village, who was this person? *List HH ID or name and person ID; or code NV if this person does not appear on the village roster* name	HH ID	Person ID	If [name] knew anyone other than a household member who was an important reason for moving here, who was this person? *Code NV if this person does not appear on village roster* name	HH ID	Person ID
1																
2																
3																
4																
5																
6																
7																
8																
9																
10																
11																
12																
13																
14																
15																
16																
17																
18																

Section 6 -- INFORMATION ON SIBLINGS, PARENTS, AND OTHER NON-HOUSEHOLD MEMBERS

Part a: NEW -- fill out for all non co-resident ***siblings, parents and children*** *of the Household Head and spouse*

Relative number	1 Name	1 Person ID	2 Sex (1 = Male; 2 = Female)	3 What is the relation of [name] to this household? 1 = parent of HH head 2 = parent of HH head's spouse 3 = sibling of HH head 4 = sibling of HH head's spouse 5 = child of HH head with current spouse 6 = child of HH head with another person 7 = child of HH head's spouse with another person	4 In what year was [name] born?	5 At what age did [name] stop living with his / her parents? *(code 888 if still living with parents)*	6 What is the highest level of education that [name] completed? (see codes below)	7 What was the age of [name] at his/her first marriage? *(if never or not yet married code 888 and then >> 10)*	8 What is the highest level of education completed of [name's] current / most recent spouse (see codes below)	9 To what ethnic group does [name's] current / most recent spouse belong? (see codes)	Ethnic group codes 1=Asante 2=Akwapim 3=Fanti 4=Ga 5=Dangme 6=Krobo 7=Ewe 8=Guan 9=Nzema 10=Hausa 11=Dagomba 12=Mamprusi 13=Gonja 14=Grussi/ Frafra 15=Dagati 16=Kusasi 17=Kassena-Nankani 18=Kankoma 19=Nanumba 20=Builsa 21=Other (specify)
R1											
R2											
R3											
R4											
R5											
R6											
R7											
R8											
R9											
R10											
R11											
R12											
R13											
R14											
R15											
R16											
R17											
R18											

Codes for col. 6 and 8: 1=None; 2=Primary; 3=Middle/JSS; 4=Voc/Comm; 5='O' level; 6=SSS; 7='A' level; 8=Training college; 9=Tech/prof; 10=Tertiary; 11=Koranic; 12=Don't know

Section 6– INFO ON SIBLINGS, PARENTS, AND OTHER NON-HOUSEHOLD MEMBERS (page 2)

Part 1: NEW -- fill out for all non co-resident ***siblings, parents and children*** *of the Household Head and spouse*

Relative number	How many currently living children does [name] have?		12	13	14	15	16	17	18	19		20	21
	10 sons	11 daughters	Has [name] ever held a political office? 0 = None 1 = Member of Parliament 2 = District Chief Executive 3 = Assembly Man/Woman 4 = Unit Committee Member 5 = National Political Office [Minister, Deputy Minister, etc.] 6 = Paramount chief (Omanhene) 7 = Sub-chief 8 = Regent (Odikro) 9 = Other (specify)	Is [name] still alive? 1=yes (>> 15) 2=no	What year did [name] die? >> next relative	How many visits did [name] make to your household last year (if more than zero, >> 17)	What year did [name] last visit? *code 888 if [name] has never visited this household*	How many phone calls, letters, or other contacts (other than visits in person) has [name] made to the household in the past 12 months?	How many people currently live in [name]'s household?	What is the total land-holding of [name's] current household? *Unit codes: 1 = acre 2 = pole 3 = rope 4 = plot* amount	unit code	Does [name] live in your village? 1 = Yes; 2 = No (if no >> 22)	Do you farm together with [name]? 1 = Yes 2 = No >> 26
R1													
R2													
R3													
R4													
R5													
R6													
R7													
R8													
R9													
R10													
R11													
R12													
R13													
R14													
R15													
R16													
R17													
R18													

Section 6 – INFO ON SIBLINGS, PARENTS, AND OTHER NON-HOUSEHOLD MEMBERS (page 3)

Part 1: NEW -- fill out for all ***non co-resident siblings, parents and children*** *of the Household Head and spouse*

For columns 22-25, either fill out column 22 (if the respondent lives in a city in Ghana listed in column 22) OR columns 23 and 24 (if the respondent lives in a city in Ghana not listed in column 22) OR column 25 (if the respondent left Ghana)

Relative number	Where does [name] live?			25	FOSTER STATUS FOR CHILDREN UNDER 18 (who are not living with biological parents)			**Codes for column 21:** 1=Professional / technical 2=Administra-tive / managerial 3=Clerical 4=Sales 5=Service 6=Agric./Ani-Husb./Forest/ Fishing/ Hunting 7=Production & related works 8=Workers NEC 9=Homemaker 10=In school full time 11 = other (specify) 12=Don't know
	In Ghana		Outside of Ghana		26	27	28	
	22	23	24	What is [name's] primary occupation? (give primary occupation while working if retired) (see codes)	With whom does [name] live? *[give relative number if one of the relatives named in this section or code 777 = another relative (specify relationship) 888 = not with a relative 999 = don't know/can't say]*	Does [name] attend school? 1 = Yes 2 = No	Why did you send [name] to live away? 1 = availability of better school 2 = to live in a family with better economic status 3 = other (specify)	
	COMMUNITY 1 = Kumasi 2 = Sunyani 3 = Cape Coast 4 = Koforidua 5 = Accra 6 = Tamale 7 = Bolgatanga 8 = Koforidua 9 = Wa 10 = Sekondi-Takordi 11 = Ho *Other = Write In	REGION: 2=Western 3=Central 4=Gt. Accra 5=Volta 6=Eastern 7=Ashanti 8=Brong Ahafo 9=Northern 10=Upper East 11=Upper West	COUNTRY (Write In)					
R1								
R2								
R3								
R4								
R5								
R6								
R7								
R8								
R9								
R10								
R11								
R12								
R13								
R14								
R15								
R16								
R17								
R18								

Section 6, PART B - INFORMATION ON ABSENT SPOUSES

*Part b: Applied to all **absent spouses** of any household member*

Absent Spouse Number	1 Absent spouse's name	2 Present spouse's ID no. from HH roster	3 When was [absent spouse's name] born?	4 At what age did [absent spouse's name] stop living with his / her parents? *(code 888 if still living with parents)*	5 How old was [absent spouse] when he/she was married to [present spouse]?	6 To what ethnic group does [absent spouse's name] belong? (see codes)	7 What is the highest level of schooling completed by [absent spouse's name]? (see codes below)	8 When did [absent spouse] last live with [present spouse]? *(code 888 if they have never lived together)*	9 What is the profession of [absent spouse]? *(see codes below)*	10 How many visits has [absent spouse] made to [present spouse] in past year? if more than zero >> 12	11 What was the year that [absent spouse] last visited [present spouse]?	**Ethnic group codes** 1=Asante 2=Akwapim 3=Fanti 4=Ga 5=Dangme 6=Krobo 7=Ewe 8=Guan 9=Nzema 10=Hausa 11=Dagomba 12=Mamprusi 13=Gonja 14=Grussi/ Frafra 15=Dagati 16=Kusasi 17=Kassena-Nankani 18=Kankoma 19=Nanumba 20=Builsa 21=Other (specify)
S1												
S2												
S3												
S4												
S5												
S6												
S7												
S8												
S9												
S10												

Codes for column 7: 1=None; 2=Primary; 3=Middle/JSS; 4=Voc/Comm; 5='O' level; 6=SSS; 7='A' level; 8=Training college; 9=Tech/prof; 10=Tertiary; 11=Koranic; 12=Don't know

Codes for column 9: 1=Professional/technical; 2 = Administrative/managerial; 3 = Clerical; 4 = Sales; 5=Service; 6=Agric./Ani-Husb./Forest/ Fishing/Hunting; 7=Production & related works; 8=Workers NEC; 9 = Homemaker; 10=full time student; 11=other (specify) 12=Don't know

Section 6, PART B - INFORMATION ON ABSENT SPOUSES

*Part b: Applied to all **absent spouses** of each household members (concluded)*

Absent Spouse Number	12	13	Where does [name] live primarily?		
			In Ghana		Outside of Ghana
	How many phone calls, letters, or other contacts (other than visits in person) has [absent spouse] made to [present spouse] in the past 12 months?	Has [absent spouse's name] ever held political office? 0 = None 1 = Member of Parliament 2 = District Chief Executive 3 = Assembly Man/Woman 4 = Unit Committee Member 5 = National Political Office [Minister, Deputy Minister, etc.] 6 = Paramount chief (Omanhene) 7 = Sub-chief 8 = Regent (Odikro) 9 = Other (specify)	14 COMMUNITY: 1 = Kumasi 2 = Sunyani 3 = Cape Coast 4 = Koforidua 5 = Accra 6 = Tamale 7 = Bolgatanga 8 = Koforidua 9 = Wa 10 = Sekondi-Takordi 11 = Ho *Other = Write In	15 REGION: 2=Western 3=Central 4=Gt. Accra 5=Volta 6=Eastern 7=Ashanti 8=Brong Ahafo 9=Northern 10=Upper East 11=Upper West	16 COUNTRY (Write In)
S1					
S2					
S3					
S4					
S5					
S6					
S7					
S8					
S9					
S10					

Section 7, part a - Agricultural Assets: Land, Livestock and Equipment

SECTION 7: AGRICULTURE
PART A: AGRICULTURE ASSETS; LAND, LIVESTOCK AND EQUIPMENT

1. Does any member of your household own any land (including land outside this area)?

Yes...1 (>> 3)
No....2

2. Did any member of the household own any land in the past 12 months?

Yes....1 (>> 4)
No.....2 (>> 19)

UNIT		PURCHASES								SALES							
3 How much land is owned by the household now?		4 Was any land bought in the past 12 months? Yes.....1 No.....2 (>> 6)	5 For how much. (Incl. payment in kind)?			6 Was any land bought in the two years prior to the past 12 months? Yes.....1 No.....2 (>> 8)	7 For how much. (Incl. payment in kind)?			8 Was any land sold in the past 12 months? Yes.....1 No.....2 (>> 10)	9 For how much. (Incl. payment in kind)?			10 Was any land sold in the 2 years prior to the past 12 months? Yes.....1 No.....2 (>> 12)	11 For how much. (Incl. payment in kind)?		
QTY	UNIT		VALUE	QTY	UNIT		VALUE	QTY	UNIT		VALUE	QTY	UNIT		VALUE	QTY	UNIT

RENTALS				SHARECROPPING				
12 Was any land rented out in the past 12 months? Yes .....1 No .....2 (>> 15)	13 How much land was rented out in the past 12 months?		14 For how much (incl. payment in kind)?	15 Was any land given out for share-cropping in the past 12 months? Yes .....1 No .....2 (>> 19)	16 How much land was given out for share-cropping in the past 12 months?		17 What proportion of the harvest is received by the household?	18 How much did your household receive from this? (Incl. payment in kind)
	QTY	UNIT	VALUE		QTY	UNIT	PROPORTION	VALUE

PROPORTION CODES

More than 1/2....50+	1
1/2.....50	2
1/3.....33	3
1/4.....25	4
1/5.....20	5
1/10.....10	6
1/20..... 5	7

UNIT OF AREA

Acres.....	1
Poles.....	2
Ropes.....	3
Plot.....	4
Other.....	5
(specify)	

Section 7, part a (cont'd)

SECTION 7: AGRICULTURE

PART A: CONT'D.

LIVESTOCK / FISHING

19. Has any member of the household owned any livestock or engaged in fishing/fish farming activities during the past 12 months?
Yes..1
No...2
(>>31) ☐

		20 During the past 12 months has any member of the household raised/harvested...? Yes..1 No...2(>> Next Item)	21 How many are there?	22 For how much could you sell one today? AMOUNT	23 During the past 12 months have any .... been sold? Yes.....1 No.....2 (>> 26)	24 How Many?	25 What was the total value of the sales? VALUE	26 During the past 12 months, have any....been bought by this household? Yes.....1 No.....2 (>> 29)	27 How many?	28 What was the total value of the purchases? VALUE	29 Did you rent out any animals during the last 12 months? Yes..1 No...2(>> Next Item)	30 How much did you receive from renting animals? AMOUNT
Draught Animals eg. Donkey,Horse Bullock	1											
Cattle, including calves	2										////////// ////////// //////////	////////// ////////// //////////
Sheep	3										//////////	//////////
Goats	4										//////////	//////////
Pigs	5										//////////	//////////
Rabbits	6										//////////	//////////
Other livestock	7		////// //////	////////// //////////		///// /////			////// //////		////////// //////////	////////// //////
Chicken	8										//////////	//////////
Other poultry	9		////// //////	////////// //////////		///// /////			////// //////		////////// //////////	////////// //////////
Fish (river, sea, etc).	10										////////// //////////	////////// //////////
Fish (farming)	11										////////// //////////	////////// //////////
Snail (farming)	12										////////// //////////	////////// //////////
Other	13		//////	//////////		/////			//////		//////////	//////////

FISHING/SNAIL UNIT
Basket.....1 Bowl.....2 Crate.....3 Other.....4 specify)

Section 7, part a (concl'd)

SECTION 7: AGRICULTURE
PART A: CONCL'D.

EQUIPMENT

31. Has any member of the household owned any agricultural equipment in the past 12 months?
Yes..1
No...2 (>>Part B) ☐

		32 Does any member of the house hold own any ..... now? Yes....1 No.....2 (>> 37)	33 How many? NUMBER	34 What would be the value of ..... if it were sold now? V A L U E	35 Was any ..... rented out in the past 12 months? Yes ...1 No ....2 (>> 37)	36 What was the value of the rental? V A L U E	37 Did you sell any ..... in the past 12 months? Yes ....1 No .....2 (>> Next Item)	38 What was the total value of the sales? NEXT ITEM V A L U E
Tractor	21							
Plough	31							
Trailer/ Cart	41							
Other animal drawn equipment	51		//////// ////////					
Other tractor drawn equipment	52		//////// ////////					
Spraying machine	61							
Outboard Motor	71							
Canoe	72							
Fishing Net	73							
Protective clothing/ safety equip- ment	74		//////// //////// //////// ////////					
Other..... (specify)	75		//////// ////////					

Section 7, part b - Farm/Land Details

SECTION 7
: AGRICULTURE
PART B: FARM/LAND DETAILS

I would like to list all the farm lands owned or operated by household members during the past 12 months (excluding land rented out or sharecropped out) OR IF NONE >>PART E. LIST ALL THE FARMS FOR EACH HOLDER, STARTING WITH THOSE THAT WERE CULTIVATED 12 MONTHS AGO AND THEN ADDING THOSE THAT WERE PLANTED DURING THE YEAR. FINALLY, LIST ANY FARMS OWNED BY THE HOUSEHOLD WHICH HAVE REMAINED FALLOW FOR THE 12 MONTH PERIOD. EACH HOLDER: GO RIGHT ACROSS PART, C(1) AND C(2)

1 HOLDER	2 PERSON INTER-VIEWED	3 FARM NUMBER	4 Size of farm: UNIT OF AREA (Acres .....1, Poles .....2, Ropes .....3, Plot .....4, Other .....5 (specify)) — NO. OF UNITS	4 — UNIT CODE	5 Is the farm owned by the household? (Yes, with deed ...1; Yes, without deed ...2; No .....3 (>> 8))	6 Does the household have the right to sell the farm or use it as collateral security? (Sell .....1, Security ...2, Both .....3, No right ..4 (>> 8))	7 If the farm were to be sold now how much would it be worth? — V A L U E	8 How did you obtain the land? (Bought ....1 (>> 11); Rented for cash or in kind .....2; Share-cropped by h/hold ...3 (>> 10); Use free of charge ...4 (>> 11); Distributed by village/ family ...5 (>> 11))	9 How much did it cost to rent it over the past 12 months (including payment in kind)? — A M O U N T	10 What proportion of crops go to the land lord? (SEE CODES) — %	11 Was the farm cultivated during the past 12 months? (Yes ...1; No ....2 (>> next farm))	12 What crops (incl. tree crops) were growing on this farm during the past 12 months? (THE MOST IMPORTANT IN TERMS OF REVENUE) — CROP CODE	12 — CROP CODE	13 What crops (including tree crops) were planted during the year? (1st and 2nd season) (TWO MOST IMPORTANT IN TERMS OF REVENUE) — 1st SEASON CROP CODE	13 — 1st SEASON CROP CODE	13 — 2nd SEASON CROP CODE	13 — 2nd SEASON CROP CODE
		1															
		2															
		3															
		4															
		5															
		6															
		7															
		8															
		9															
		10															
		11															
		12															
		13															
		14															
		15															

CROP LIST

Avocado pear 01
Bananas 02
Beans/Peas 03
Cashew nut 04
Cassava 05
Cocoa 06
Coconut 07
Cocoyam 08
Coffee 09
Colanut 10
Cotton 11
Garden egg/ Egg plant 12
Ginger 13
G'nut/Peanut 14
Guinea corn/ Sorghum 15
Kenef 16
Leafy vegetables .17
Lime/Lemon 18
Maize 19
Mango 20
Millet 21
Oil palm 22
Okro 23
Onion 24
Oranges/tangerine.25
Pawpaw 26
Pepper 27
Pineapple 28
Plantain 29
Potatoes/ Sweet potatoe ..30
Rice 31
Rubber 32
Sheanut 33
Sugarcane 34
Tiger nut 35
Tobacco 36
Tomatoes 37
Water melon 38
Wood lot.....39
Yam 40
Other crops 41
Other fruits 42
Other vegetables .43

PROPORTION CODES

2/3.....67	1
1/2.....50	2
1/3.....33	3
1/4.....25	4
1/5.....20	5

Section 7, part c - Harvest and Disposal of Crops

REFER TO THE SECTION 7B FOR THE FULL LIST OF CROP CODES

SECTION 7: AGRICULTURE
PART C: HARVEST AND DISPOSAL OF CROPS

Now I would like to ask some questions about all the crops that have been harvested in the past 12 months, first the grains, then other field crops

STAPLE GRAINS, OTHER FIELD CROPS AND CASH CROPS

1 HOLDER CONTI-NUED FROM PART B	2 Has (NAME) harvested any of the following crops in the past 12 months? READ FROM CROP LIST AND ENTER THOSE THAT ARE APPLICABLE IF NONE >> PART C(2)		3 What quantity did (NAME) harvest in the past 12 months?		4 If share-cropped, how much was given to the landlord in the past 12 months? PUT 9999 IF NOT SHARE-CROPPED		5 Did you sell any unpro-cessed ... in the past 12 months? Yes ....1 No .....2 (>> 12)	6 What was the main outlet? Pre-harvest contractor.1 Farm gate buyer .....2 Market trader ....3 Consumer ...4 State trading organ .....5 Coop .....6 Other .....7 (specify)	7 What quantity did (NAME) sell through this outlet?		8 What was the value of the sales through this outlet?	9 How promptly were you paid? Paid before harvest...1 At time of sale...2 Within 1 week of sale.....3 Within 1 month of sale.....4 Over 1 month.....5	10 What quantity did you sell through other outlets? IF NONE >> 12		11 What was the value of these sales?
ID	CROP NAME	CODE	NO.OF UNITS	UNIT CODE	NO.OF UNITS	UNIT CODE			NO OF UNITS	UNIT CODE	V A L U E		NO. OF UNITS	UNIT CODE	V A L U E

CROP LIST FOR C1

Beans/Peas 03
Cashew nut.....04
Cocoa 06
Coconut 07
Coffee 09
Cotton 11
Ginger 13
G'nut/Peanut 14
Guinea Corn/Sorghum .15
Kenef 16
Maize 19
Millet 21
Rice 31
Rubber 32
Sheanut 33
Sugarcane 34
Tiger nut.....35
Tobacco 36
Wood lot.....39
Other crops 41

UNIT CODE

None 00
All 01
American tin 02
Barrel 03
Basket 04
Beer bottle 05
Bowl 06
Box 07
Bunch 08
Bundle 09
Fanta bottle 10
Fingers 11
Fruit 12
Gallon 13
Kilogram 14
Litre 15
Log 16
Margarine tin ...17
Maxi bag 18
Mini bag 19
Nut 20
Pounds 21
Sheet 22
Stick 23
Tonne 24
Tree 25
Tubers 26

Section 7, part c (concl'd)
REFER TO THE SECTION 7B FOR THE FULL LIST OF CROP CODES

SECTION 7: AGRICULTURE
PART C: CONCL'D.

Now I would like to ask some questions about all the crops that have been harvested in the past 12 months, first the grains, then other field crops

STAPLE GRAINS, OTHER FIELD CROPS AND CASH CROPS

HOLDER CONTI-NUED FROM PART B	12 What was the acreage?		13 If you had sold all ..... harvested in the past 12 months, what would have been the total value?	14 What quantity of it was processed by the household in the past 12 months?		15 What quantity was used as seed in the past 12 months?		16 What quantity of the harvest was given to labour in the past 12 months?		17 How many people were engaged on the farm by sex?	
ID	No. OF UNITS	UNIT CODE	V A L U E	NO.OF UNITS	UNIT CODE	NO. OF UNITS	UNIT CODE	NO. OF UNITS	UNIT CODE	MALE	FEMALE

CROP LIST FOR C (1)

Beans/Peas 03
Cashew 04
Cocoa 06
Coconut 07
Coffee 09
Cotton 11
Ginger 13
G'nut/Peanut 14
Guinea corn/Sorghum 15
Kenef 16
Maize 19
Millet 21
Rice 31
Rubber 32
Sheanut 33
Sugarcane 34
Tiger nut 35
Tobacco 36
Wood lot 39
Other crops 41

UNIT CODE

None 00
All 01
American tin 02
Barrel 03
Basket 04
Beer bottle 05
Bowl 06
Box 07
Bunch 08
Bundle 09
Fanta bottle 10
Fingers 11
Fruit 12
Gallon 13
Kilogram 14
Litre 15
Log 16
Margarine tin 17
Maxi bag 18
Mini bag 19
Nut 20
Pounds 21
Sheet 22
Stick 23
Tonne.....24
Tree 25
Tubers 26

Section 7, part d - Other Agricultural Income

SECTION 7: AGRICULTURE
PART D: OTHER AGRICULTURAL INCOME (IN CASH AND IN KIND)

Now I would like to ask you about other household sales of produce during the past 12 months.

How much were your sales of / from							
1 Hunting (game)?	2 Honey?	3 Fruit, Berries, etc.?	4 Milk from cows?	5 Other dairy products?	6 Eggs?	7 Mushroom?	8 Snail/ crab collection?
VALUE	VALUE	VALUE	VALUE	VALUE	VALUE	VALUE	VALUE

Section 7, part e - Agricultural Costs and Expenses

SECTION 7: AGRICULTURE
PART E: AGRICULTURAL COSTS AND EXPENSES
RESPONDENT: MAIN HOLDER ONLY (ASK WHETHER RESPONDENT OWNS OR OPERATES FARM; IF NO >> LIVESTOCK/FISHING COSTS, Q1). Now I would like to ask about costs and expenses incurred over the past 12 months for the production of crops. During this period, has any of the following been used on any of the holdings? (DO NOT INCLUDE COSTS ASSOCIATED WITH PROCESSING)

CROP COSTS	CODE	1 Did you spend anything on ....in the past 12 months? Yes..1 No...2 (>>Next Item)	2 How much was spent in cash & in kind on..... during the past 12 months? AMOUNT	3 What was the source of ..... Private sector..1 Coop.....2 MOFA.....3 NGOs.....4 Other....5 (SPECIFY)	4 Was..... obtainable in this community any time during the year when you needed it? Yes....1 No.....2
Fertilizer (Inorganic)	01				
Organic Fertilizer	02				
Insecticides	03				
Herbicides	04				
Storage of crops	05				
Purchased seed, seedlings. etc.	06				
Irrigation	07				
Bags, containers, string	08				
Petrol/Diesel/Oil	09				
Spare parts	10				
Hired labour	11				
Transport of crops	12				
Renting animals	13				
Renting equipment	14				
Hand tools local	15				
Hand tools imported	16				
Repairs/Maintenance	17				
Other crop costs	18				

Now I would like to ask some questions about your livestock/fishing costs
(CHECK IF PART 7A Q.20=1) IF NO LIVESTOCK >> FISHING COSTS

LIVESTOCK COSTS	CODE	1 Did you spend anything on ..... in the past 12 months? Yes.....1 No.....2 Next Item	2 How much was spent in cash & in kind on ..... during the past 12 months? AMOUNT	3 What was the source of .....? Private sector...1 Coop.....2 MOFA.....3 NGOs.....4 Other.....5 (specify)	4 Was ..... obtainable in this community at anytime during the year when you needed it? Yes.....1 No.....2
Animal feed including salt	51				
Vet. services incl. vacc. and medicine	52				
Paid labour for herding	53				
Maintenance of pens, stables	54				
Transport of animal feed	55				
Commission on sale of animals	56				////////////// //////////////
Compensation for damage caused by animals	57				////////////// //////////////
Other livestock costs	58				
Hired Labour	59				
FISHING COSTS					
Fuel/Lubricants	61				
Hired Labour	62				
Spare Parts	63				
Repairs and Maintenance	64				
Hiring of Equipment	65				
Other Inputs	66				

Section 7, part f - Processing of Agricultural Produce

SECTION 7: AGRICULTURE
PART F: PROCESSING OF AGRICULTURAL PRODUCE RESPONDENTS: PERSON RESPONSIBLE FOR PROCESSING

NAMES OF PERSONS RESPONSIBLE
COPY FROM SECTION 6 Q.5

NAME

CHECK IF SECTION 6 Q.4=1

I would now like to ask about processing of crops and smoking of fish/meat. This means any crops/fish processed by the household, whether grown or caught by your household or by anyone else.

1 PERSON ID	2 PERSON ID	3 What type of food processing or transformation have you carried out in the past 12 months? REFER TO LIST OF PRODUCTS BELOW AND WRITE ITEM AND CODE: ITEM	CODE	4 How many months in the past 12 months did you do this activity? MONTHS	5 Did you make any ..... in the last 2 weeks? Yes ..1 No ...2 (>> 10)	6 What quantity did you process in the last 2 weeks? USE ANY UNIT OF THE RESPONDENT'S CHOICE: NO.OF UNITS	UNIT CODE	7 What were your labour costs both in cash and in kind in the last 2 weeks? BE SURE TO INCLUDE RESPONDENT TIME (LABOUR COST) VALUE	8 Where did the raw materials mainly come from? Own produce ...1 Purchased ..2 Gift .....3 Other .....4 (specify)	9 What other cost did you incur in the last 2 weeks? VALUE	10 Did you sell any .....in the last 2 weeks? Yes ....1 No .....2 (>> 13)	11 What quantity did you sell? NO. OF UNITS	UNIT CODE	12 What was the value of the sales? >> NEXT LINE AMOUNT	13 For how much could you sell one unit? UNIT CODE	VALUE

UNIT CODE

All 01	Tonne 24
American tin 02	Tree 25
Barrel 03	Tubers 26
Basket 04	
Beer bottle 05	
Bowl 06	
Box 07	
Bunch 08	
Bundle 09	
Fanta bottle 10	
Fingers 11	
Fruit 12	
Gallon 13	
Kilogram 14	

CODES FOR PROCESSED/ TRANSFORMED GOODS

Cassava flour.....01	
Cooking oils.....02	
Flour from other grains.....03	
Gari.....04	
Groundnut paste.....05	
Home-brewed drink.....06	
Husked/polished rice.....07	
Maize flour.....08	
Processed fish.....09	
Processed meat.....10	
Sheabutter.....11	
Cassava dough.....12	
corn dough.....13	
Other (specify) 16	

Section 8 - Information Seeking

Type of organization	1 How many contacts has your household had with this organization in the past 12 months?	2 Did you have to pay? 1 = yes 2 = no	3 What was the primary type of information that was requested? 1 = agriculture 2 = non-agricultural production 3 = resource management 4 = business 5 = other (specify) *if answered 2-5, >> 10*	4 Did you request info-rmation about **crops**? 1 = yes 2 = no (if no >>7)	5 What crops did you request assistance about? (list all crop codes that apply. Get codes from section 7C)	6 What were your crop concern(s) regarding (list all that apply) 1 = use of fertilizer 2 = irrigation 3 = new seed varieties 4 = pest infestation 5 = weather 6 = marketing 7 = blight/crop disease 8 = access to credit 9 = general information 10 = other (specify)	7 Did you request info-rmation about **livestock**? 1 = yes 2 = no (if no >> next org.)	8 What livestock did you request assistance about? (list all that apply) 1 = draught animal (donkey, horse, bullock) 2 = cattle 3 = sheep 4 = goats 5 = pigs 6 = rabbits 7 = chicken 8 = fish 9 = snail 10 = other (specify)	9 What were your livestock concern(s) regarding (list all that apply) 1 = vaccination 2 = disease 3 = feed/nutrition 4 = insemination 5 = other (specify) >> *next organization*	10 Was the advice you asked regarding: 1 = activities for household only 2 = activities related to a business/enterprise 3 = both 4 = other (explain)
Government Extension Office										
Input Supplier										
Farmer Based Organization (registered)										
Farmer Based Organization (unregistered)										
Nonprofit Organization / NGO (specify):_____										
Nonprofit Organization / NGO (specify):_____										
Nonprofit Organization / NGO (specify):_____										
Nonprofit Organization / NGO (specify):_____										

11.a. Did you receive any home visits from agriculture extension agents in the past year? ☐ Yes ☐ No

11.b. How many? _____ 9.c. Were these visits solicited? ☐ Yes ☐ No

12 Did you receive an extension service in any of the following media in the past year?

	Service									
12.a	Gov't	☐	radio	☐	television	☐	newspaper	☐	pamplet	☐ other _____
12.b	NGO	☐	radio	☐	television	☐	newspaper	☐	pamplet	☐ other _____
12.c	Input Supp	☐	radio	☐	television	☐	newspaper	☐	pamplet	☐ other _____
12.d	Other	☐	radio	☐	television	☐	newspaper	☐	pamplet	☐ other _____

13.a Did you receive agricultural advice from relatives/friends/neighbors in the past year? ☐ Yes ☐ No

13.b if so, how frequently? ☐ several times a week or more ☐ about once a week ☐ about once a month ☐ occasionally

14.a Did you give agricultural advice to relatives/friends/neighbors in the past year? ☐ Yes ☐ No

14.b if so, how frequently? ☐ several times a week or more ☐ about once a week ☐ about once a month ☐ occasionally

15.a Did you receive business/production/management advice from relatives/friends/neighbors in the past year? ☐ Yes ☐ No

15.b if so, how frequently? ☐ several times a week or more ☐ about once a week ☐ about once a month ☐ occasionally

16.a Did you give business/production/management advice to relatives/friends/neighbors in the past year? ☐ Yes ☐ No

16.b if so, how frequently? ☐ several times a week or more ☐ about once a week ☐ about once a month ☐ occasionally

Section 9, part a -- Household enterprise update

whole page inputted from responses to GLSS5; fill out all items for new enterprises

Enterprise number	1	2	3		4	5		7	8	9		10	11	12
	Name of enterprise	Person responsible			ID of person interviewed	What is the principal activity of this enterprise?		What is the main secondary activity of the enterprise?		How long has this enterprise actively been operating?		How many months during the past 12 months did the enterprise operate?	Does the income of the enterprise belong entirely to you? 1 = yes (>> 11) 2 = no	What percentage of the income of this enterprise belongs to you? (see codes below)
		Name	HH ID	Person ID		Name of activity	ISIC Code	Name of activity	ISIC Code	years	months			
1														
2														

Enterprise number	13	14	15	16	17	18	19	20	21
	Is this enterprise registered with any government agency? YES 1 = Registrar general's Dept. 2 = Dept. of Cooperatives 3 = District Assembly 4 = Other (specify) NO = 5	What was the most serious difficulty in establishing this enterprise? 1 = no difficulty 2 = Capital / credit 3 = Technical know-how 4 = Govt. regulation 5 = Other (specify)	What was the main source of capital in setting up this enterprise? (see codes)	What is the nature of this capital? 1 = loan 2 = gift 3 = self-financed	During the past 12 months, has this enterprise tried to get credit from banks and other financial agencies? 1 = Yes, succesfully 2 = Yes, unsuccesfully 3 = No (>>18)	During the past 12 months, from where has this enterprise tried to get credit? Fill In	During the past 12 months, how much altogether has the enterprise borrowed? (new loans only) cedis and pesewas	During the past 12 months, how much of the total loans has this enterprise repaid? cedis and pesewas	Have you ever had to borrow from a friend or relative in order to make a loan payment? 1 = yes 2 = no
1									
2									

Codes for column 13:
1 = household savings
2 = bank
3 = remittances from abroad
4 = proceeds from family farms
5 = proceeds from family nonfarm enterprise
6 = income from family propert(ies)
7 = NGO support
8 = District assembly / town Dev. Assoc. support
9 = church assistance
10 = moneylenders
11 = relatives/friends
12 = other partners
96 = other (specify)

ISIC Codes: 1=Agriculture, 2=Hunting/Fishing, 3=Mining, 4=Manufacturing, 5=Electricity/Gas/Water Supply, 6=Construction, 7=Wholesale/Retail Trade, 8=Hotels/Restaurants, 9=Transportation/Storage/Communications, 10=Financial, 11=Real Estate, 12=Public Administration/Defense, 13=Education, 14=Health/Social Work, 15=Private Household with Employed Persons, 16=Other (specify), 17=Unemployed

SHARE CODES: 1 = 75% (3/4); 2 = 50% (1/2); 3 = 33% (1/3); 4 = 25% (1/4); 5 = 20% (1/5); 6 = 10% (1/10); 7 = 5% (1/20)

Section 9, part a -- Additional characteristics of HH enterprise

fill out for all current (i. e. currently operating or planning to resume operation within the year) HH enterprises

Enterprise number	In a typical year, are your sales high, average, low, or none (i. e., business is not in operation) in the month of [MONTH]? 1 = High 2 = Average 3 = Low 4 = None: not in operation											
	22	23	24	25	26	27	28	29	30	31	32	33
	Jan	Feb	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
1												
2												

Enterprise number	34	35	36
	What is your average level of sales in a "low" month?	What is your average level of sales in an "average" month?	What is your average level of sales in a "high" month?
	(cedis and pesewas)	(cedis and pesewas)	(cedis and pesewas)
1			
2			

	Enterprise 1	Enterprise 2	
(37) Has this business operated in the last 3 months?			(1 = Yes; 2 = No)
(38) In this last 1 month?			
(39) In the last 2 weeks?			
(40) In the last 1 week?			

Section 9, part b -- Detailed labor allocation of employees in household enterprise

NEW -- list all people who worked in one or both of the household enterprises you managed in the last year

Worker no.	1 Is worker a household member? 1 = yes; 2 = no (if no, >> 3)	2 If household member, list ID (>> 10)	Employee's name and village ID *code NV if employee does not appear on village roster* 3 name	4 HH ID	4 Person ID	5 Gender (1 = Male; 2 = Female)	6 Status 1 = skilled regular employee 2 = unskilled regular employee 3 = apprentice 4 = casual worker 5 = working proprietor	7 How is [name] paid? 1 = fixed salary 2 = percent of profits (>> 9) 3 = in kind 4 = not paid (>> 10) 5 = other (specify)	8 What is the salary paid to [name], or the value of in kind goods given to [name]? (>> 10) value (cedis and pesewas)	time code	9 What percentage of profits are given to [name]? (%)	Enterprise 1 10 About how many days did [name] work in this enterprise during the past year?	Enterprise 1 11 On average, how many hours per day does [name] work in this enterprise?	Enterprise 2 12 About how many days did [name] work in this enterprise during the past year?	Enterprise 2 13 On average, how many hours per day does [name] work in this enterprise?
1															
2															
3															
4															
5															
6															
7															
8															
9															
10															
11															
12															
13															
14															
15															
16															
17															
18															

TIME UNIT CODES: 1 = daily; 2 = weekly; 3 = fortnightly; 4 = monthly; 5 = quarterly; 6 = yearly

Section 9, part c -- Expenditures in household enterprise (enterprise 1)

Fill out for enterprise #1

	Item	1	2		3
		During the past 12 months, has the enterprise spent anything on [ ]? 1 = Yes 2 = No (>> 3)	How much did you spend on [ ] during the past 12 months? GH¢	P	During the past 12 months, was [ ] available when you needed / wished to purchase it? 1 = always 2 = often 3 = not often 4 = not needed 5 = no
1	Taxes on product				
2	Articles for resale				
3	Rents on assets/land and buildings				
4	Raw materials				
5	Travelling and Transport (T & T)				
6	Fuel & lubricants				
7	Electricity				
8	Water				
9	Telephones				
10	Printing / stationary / postage / packing				
11	Spare parts				
12	Repairs / maintenance of fixed assets				
13	Lease of machinery or transport equipment				
14	Advertising / computer service				
15	Bank charges (excluding int.)				
16	Training				
17	Treatment / disposal of waste products				
18	Uniform and clothing				
19	Accident claims				
20	Other (specify)				

Section 9, part c -- Expenditures in household enterprise (enterprise 2)

Fill out for enterprise #2

	Item	4	5		6
		During the past 12 months, has the enterprise spent anything on [ ]? 1 = Yes 2 = No (>> 6)	How much did you spend on [ ] during the past 12 months? GH¢	P	During the past 12 months, was [ ] available when you needed / wished to purchase it? 1 = always 2 = often 3 = not often 4 = not needed 5 = no
1	Taxes on product				
2	Articles for resale				
3	Rents on assets/land and buildings				
4	Raw materials				
5	Travelling and Transport (T & T)				
6	Fuel & lubricants				
7	Electricity				
8	Water				
9	Telephones				
10	Printing / stationary / postage / packing				
11	Spare parts				
12	Repairs / maintenance of fixed assets				
13	Lease of machinery or transport equipment				
14	Advertising / computer service				
15	Bank charges (excluding int.)				
16	Training				
17	Treatment / disposal of waste products				
18	Uniform and clothing				
19	Accident claims				
20	Other (specify)				

Section 9, part d – Revenue for enterprises in wholesale/retail trade

	Main Items sold	Last purchased (*respondent can choose to give answer in units, or the value of units purchased as a whole*)							Sales during last two weeks (*answer about a typical two weeks if enterprise has not operated in past two weeks*)					
		1	2	3		4	5		6	7	8		9	
		Product code	Unit code	unit price GH¢	unit price P	Quantity purchased	value of total purchases GH¢	value of total purchases P	Unit code	No. units sold	unit price GH¢	unit price P	value of total purchases GH¢	value of total purchases P
FIRST ENTERPRISE														
1														
2														
3														
4														
5														
6														
7														
8														
9														
10														
SECOND ENTERPRISE														
1														
2														
3														
4														
5														
6														
7														
8														
9														
10														

Unit codes:
American tin = 02
Balls = 27
Bar = 28
Barrel = 03
Basket = 04
Beer bottle = 05
Bowl = 06
Box = 07
Bucket = 29
Bunch = 08
Bundle = 09
Crate = 30
Dozen = 31
Fanta / coke bottle = 10
Fingers = 11
Fruits = 12
Gallon = 14
Kilogram = 14
Litre = 15
Loaf = 32
Log = 16
Margarine tin = 17
Maxi bag = 18
Mini bag = 19
Nut = 20
Pair = 33
Pieces = 34
Pots = 35
Pounds = 21
Set = 36
Sheet = 22
Singles = 37
Stick = 23
Tonne = 24
Tree = 25
Tubers = 26
Yards/metres = 38

Section 9, part e -- Revenue for food enterprises

From GLSS5 -- if business has operated in last 7 days repeat to get current information; otherwise skip

1	2	3
Enterprise number	In the past week, how much on average did you earn from the sale of meals in a day? *(amount in cedis and pesewas)*	How many days during the past 7 days did you prepare meals for sale?

What is the total cost of ingredients purchased in a day?
4
Amount (cedis and pesewas)

What is the cost of the following inputs used in 7 days?	
5	6
Input	Amount (cedis and pesewas)
1. Firewood / charcoal	
2. Gas	
3. Water	
4. Soap	
5. Other: _____	
All others	

Unit codes:
American tin = 02
Balls = 27
Bar = 28
Barrel = 03
Basket = 04
Beer bottle = 05
Bowl = 06
Box = 07
Bucket = 29
Bunch = 08
Bundle = 09
Crate = 30
Dozen = 31
Fanta / coke bottle = 10
Fingers = 11
Fruits = 12
Gallon = 14
Kilogram = 14
Litre = 15
Loaf = 32
Log = 16
Margarine tin = 17
Maxi bag = 18
Mini bag = 19
Nut = 20
Pair = 33
Pieces = 34
Pots = 35
Pounds = 21
Set = 36
Sheet = 22
Singles = 37
Stick = 23
Tonne = 24
Tree = 25
Tubers = 26
Yards/metres = 38

Section 9, part E -- Revenue for service enterprise and other enterprise

Fill out for service industries if enterprise has been operational in the past 1 or 3 months

		SERVICE	ENTERPRISE 1 How much was earned through the provision of service during the last . . .? (amount in cedis and pesewas)			ENTERPRISE 2 How much was earned through the provision of service during the last . . .? (amount in cedis and pesewas)		
			1		2	3		4
			1 month		3 months	1 month		3 months
1		Delivery of goods sold						
2		Provision of other services						
3		Rental of buildings						
4		Rental of machinery and transport equipment						
5		Commissions						
6		Royalties, copyrights, etc. belonging to the enterprise						
7		Storage and handling fees						
8		Inspection and valuation fees						
9		Sale of scrap						
10		Profit of sales and fixed assets						
11		Other (specify)						

Fill out for all other enterprises.

ENTERPRISE NUMBER	Operating in the last 2 weeks							Not operating in the last 2 weeks						
	5		6	7		8	9	10		11	12		13	14	
	During the last 2 weeks, how much revenue has been received from the sale of goods and services by this enterprise? (amount in cedis and pesewas)		During the last 2 weeks, has this enterprise received payments in the form of goods and services? 1 = Yes 2 = No (>> 8)	What was the estimated value? (cedis and pesewas)		During the last 2 weeks, have any of the goods and services been consumed by the household members instead of being sold? 1 = Yes 2 = No (>> next page)	What was the value of the products consumed by the household in the last 2 weeks? (cedis and pesewas) >> next page	How much revenue is usually received from the sale of goods and services by this enterprise in a 2 week period? (amount in cedis and pesewas)		Does the enterprise usually receive payments in the form of goods and services? 1 = Yes 2 = No (>> 13)	What is the usual value of payments in the form of goods and services in a two week period? (cedis and pesewas)		Are some of the good usually consumed by the household instead of being sold? 1 = Yes 2 = No (>> next page)	What is the value of the products usually consumed by the household instead of being sold over a 2 week period? (cedis and pesewas)	
	GH¢	P		GH¢	P			GH¢	P		GH¢	P		GH¢	P
1															
2															

Section 10 (Transfers), Part 1-- TRANSFERS OUT OF THE HOUSEHOLD

Is there anyone (including household members) not living in the household at the time to whom the household has sent money or goods in the past year?

Fill out entire page for all transfers

Transfer number	1	2	3	4	5		6			7		8		9	10	11
	Name of person to whom money is sent (Move to part 2 if no transfers are made out of the household)	If household member, ID	Were these remittances made on a regular basis? Yes, 1 = weekly 2 = monthly 3 = quarterly 4 = annually No = 5 Other (specify) = 6	Will these remittances be repaid at some future time? 1 = Yes 2 = No	What was the total amount of the cash sent to or given to this individual during the past 12 months?		What were the three main uses of the cash sent / given? 1 = daily consumption 2 = housing 3 = business 4 = education 5 = health 6 = funeral 7 = other ceremony 8 = savings 9 = agriculture 10 = other			What was the total value of food sent to or given to this individual in the past 12 months?		What was the total value of other goods sent to or given to this individual in the past 12 months?		Where does this recipient live? 1=this town/village 2=Sekondi / Takordi 3=Cape Coast 4=Accra 5=Ho 6=Koforidua 7=Kumasi 8=Suyani 9=Tamale 10=Bolgatanga 11=Wa 12=other urban 13=rural 96=Other ECOWAS 97=Africa other than ECOWAS 98=Outside Africa	If not a household member, is this person a blood relative or spouse of a household member? 1 = Yes; 2 = No	Through what means did you send the remittance? 1 = Bank account 2 = Money transfer agency 3 = Sender him or herself 4 = Cash carried by someone else 5 = Other (specify)
					GH¢	P	a	b	c	GH¢	P	GH¢	P			
1																
2																
3																
4																
5																
6																
7																
8																
9																
10																

Section 10, Part 2 -- TRANSFERS INTO THE HOUSEHOLD

Is there anyone (including household members) not living in the household <u>from whom</u> the household has received money / goods in the past year?

Fill out entire page for all transfers

Transfer number	1	2	3	4	5		6	7			8		9		10	11	12
	Name of person from whom money is received (Move to part 3 if no transfers are made into the household)	If household member, ID	Were these remittances made on a regular basis? Yes, 1 = weekly 2 = monthly 3 = quarterly 4 = annually No = 5 Other (specify) = 6	Will these remittances be repaid at some future time? 1 = Yes 2 = No	What was the total amount of the cash sent to or given to this individual during the past 12 months?		Through what means did you receive the remittance? 1 = Bank account 2 = Money transfer agency 3 = Sender him or herself 4 = Cash carried by someone else 5 = Other (specify)	What were the three main uses of the cash sent / given? 1 = daily consumption 2 = housing 3 = business 4 = education 5 = health 6 = funeral 7 = other ceremony 8 = savings 9 = other			What was the total value of food sent to or given to this individual in the past 12 months?		What was the total value of other goods sent to or given to this individual in the past 12 months?		Where does this recipient live? 1=this town/village 2=Sekondi / Takordi 3=Cape Coast 4=Accra 5=Ho 6=Koforidua 7=Kumasi 8=Suyani 9=Tamale 10=Bolgatanga 11=Wa 12=other urban 13=rural 96=Other ECOWAS 97=Africa other than ECOWAS 98=Outside Africa	If not a household member, is this person a blood relative or spouse of a household member? 1 = Yes; 2 = No (if no >> next transfer)	If this person was one of the relatives mentioned in the previous section, give relative number or 999 = another relative
					GH¢	P		a	b	c	GH¢	P	GH¢	P			
1																	
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	

Section 10, part 3 -- Miscellaneous Income & Expenditures

During the past 12 months, how much income in cash or kind, did any member of the household receive from the following sources?

Member ID	From Central Government						From Other Sources					
	1		2		3		4		5		6	
	Social Security		State Pension		Other (specify)		Retirement Benefits		Dowry or inheritance		Other (specify) INCL. DONATIONS FROM CHURCHES, INSTITUTIONS, DIVIDENDS, INTEREST. (EXCLUDE SUSU)	
	Amount		Amount		Amount		Amount		Value		Amount	
	GH¢	P	GH¢	P	GH¢	P	GH¢	P	GH¢	P	GH¢	P
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												
16												
17												
18												

During the past 12 months, how much did the household spend (in cash and in kind) on:

7		8		9		10	
Taxes (TV license, property tax, etc)		Contribution to self-help projects		Weddings, dowry, funerals and other cermonies		Gifts and presents excluding those mentioned as transfers (INCLUDE CONTRIBUTIONS / DONATIONS TO CHURCES INSTITUTIONS, ETC)	
Amount		Amount		Amount		Amount	
GH¢	P	GH¢	P	GH¢	P	GH¢	P

Section 11 (savings, credit, assets) part a – Borrowing

Fill out entire sheet for any loans

Loan Number	1	2	3		4	5	6		7	8	9	10		11	12		13
	Which household member obtained the loan? (give ID)	What is the source of this loan? 1 = State bank 2 = Private bank 3 = Cooperative 4 = Govt. agency 5 = NGO 6 = Business firm 7 = Employer 8 = Moneylender 9 = Trader 10 = Farmer 11 = Relative / neighbor / friend 12 = Community epicenter 13 = other (specify)	What was the total amount of the original loan? (cedis) GH¢	P	For what purpose was the loan contracted? 1 = Agricultural land / equipment 2 = Agricultural inputs 3 = Business 4 = Housing 5 = Education / training 6 = Health 7 = Ceremonies (weddings, funerals, etc.) 8 = Vehicle 9 = Other consumer goods 10 = Other (specify)	What kind of guarantee was required by the lender? 1 = None 2 = Land 3 = Cattle 4 = House / building 5 = Employer 6 = Relatives 7 = Non-relatives 8 = Other (specify)	How much of the loan has been repaid in the past twelve months? (cedis and pesewas) GH¢	P	Do you have to pay interest on this loan? 1 = Yes 2 = No	If so, what is the interest rate? (%)	How frequently do you make payments on this loan? 1 = Daily 2 = Weekly 3 = Forthnightly 4 = Quarterly 5 = Semester 6 = Annual 7 = Only one final payment 8 = No fixed schedule	How much money is currently owed? (cedis) GH¢	P	To whom is this money owed? (give name of person or organization / bank) name	HH ID	Person ID	If land is being used as collateral (see question 5), then who is using the land? 1 = person to whom money is owed 2 = member(s) of the household 3 = someone else 8 = don't know
1																	
2																	
3																	
4																	
5																	
6																	
7																	
8																	

Section 11, part c -- Saving

1. Does any member of the household have a savings account or participate in Susu? 1 = yes, 2 = no (>> 7) _____

Item Number	1 ID of member's name on account	2 Where is this account? (enter codes from village survey, one of which is community epicenter)	3 In what currency is the account? SEE CURRENCY CODES BELOW	4 What is the current balance of these savings?	5 How much has been added to the savings in the past 12 months? (EXCLUDE INTEREST)	6 How much has been withdrawn from the savings in the past 12 months?
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

CURRENCY CODES: 1 = cedis and pesewas; 2 = naira; 3 = CFA; 4 = pound; 5 = dollar; 6 = euro; 7 = yen; 8 = other (specify)

(7) Does the household have any savings that are kept at home

(i. e., not in a bank or in a susu)?

(1 = Yes; 2 = No)

_____

(8) If so, how much?

	amount
	currency code (see below)

Section 11, part d -- Lending

0. Is any member of the household owed money? _____ (1 = Yes; 2 = No, if no >> next page)

Loan Number	1	2	3		4		5		6		7	8	9
	To whom was this loan given? 1 = Employee 2 = Tenant 3 = Relative 4 = Neighbor / friend 5 = other (specify)	Give receiver's name and village ID (code "NV" for ID if not a resident of village)			What was the total amount of the original loan given to the recipient?		When the loan was started, how much in total did the recipient have to pay you back?		How long ago was the loan started?		What kind of guarantee was required of the receiver? 1 = None 2 = Land 3 = Cattle 4 = House / building 5 = Employer 6 = Relatives 7 = Non-relatives 8 = Other (specify)	How much does the recipient currently owe? (cedis)	How frequently are payments made on this loan? 1 = Daily 2 = Weekly 3 = Forthnightly 4 = Quarterly 5 = Semester 6 = Annual 7 = Only one final payment 8 = No fixed schedule
		name	HH ID	Person ID	GH¢	P	GH¢	P	Years	Months			
1													
2													
3													
4													
5													
6													
7													
8													

Section 12, Part A -- Housing Characteristics: Rent

1. How much does the household pay in cash towards the rent?

Amount | Time Unit

2. Does your household also supply goods or services in exchange for this dwelling?
1 = Yes
2 = No

Code

3. What is the appropriate value of these goods and services provided by your household?

Amount | Time Unit

4. Is part or all of the rent paid by someone who is not a member of your household?
1 = Yes All
2 = Yes Part
3 = No

Code

5. Who pays?
1 = Relative
2 = Private employer
3 = Givernment
4 = Private individual / agency
5 = Other

Code

6. How much is paid?

Amount | Time Unit

7. How much did your household spend for construction or repair costs and painting in the last 12 months on this dwelling?

Amount

Time Units:
1 = Daily
2 = Weekly
3 = Monthly
4 = Quarterly
5 = Half yearly
6 = Yearly
0 = N/A

Section 12, Part A -- Housing Characteristics: Utilities

8. What is the main source of water supply for this household?
See codes

Drinking: ☐ General Use: ☐

9. How far is this source of water from your dwelling?

Drinking distance: ☐ Drinking distance: ☐

General use distance: ☐ General use distance: ☐

10. In the past 30 days, how many days has each of the above water sources been unavailable, for whatever reason?

General use: ☐ Drinking: ☐

11. How much water does your household use in a day?
Units:
1 = Litres
2 = Gallons
3 = Bucket (No. 34)

Quantity: ☐ Unit: ☐

12. How is the water supply system operated and managed?
1 = Self
2 = Community operated and managed
3 = Community Water Sanitation Agency
4 = Ghana Water Company Limited
5 = NGO
6 = Other (specify)
7 = Not Applicable

General use: ☐ Drinking: ☐

13. Does the household pay a regular bill for each water supply system?
1 = Yes
2 = No
If no to both, >>15

General use: ☐ Drinking: ☐

14. The last time you paid, what was the total amount for both sources? (only your part if joint meter or shared bill)

Amount: ☐ Time Unit: ☐

15. How much did your household pay to a private water vendor, neighbour or standpipe or any other source in the last 2 weeks?

Amount: ☐

16. Did your household sell any water to someone else?
1 = Yes
2 = No (>>18)

Amount: ☐

17. How much did your household receive for the water sold in the last 2 weeks?

Amount: ☐

18. What is the main source of lighting for your dwelling?
1 = Electricity (mains)
2 = Kerosene (>>20)
3 = Gas lamp (>>20)
4 = Candles / Torches (flashlights) (>>20)
5 = Solar energy (>>20)
6 = Generator (>>20)
7 = No light (>>20)
8 = Other (specify) (>>20)

Code: ☐

19. How much was your last bill (Only your part if you have a joint meter or a shared bill)?

Amount: ☐ Time Unit: ☐

20. What is the main fuel used by the household for cooking?
1 = None, no cooking
2 = Wood
3 = Charcoal
4 = Gas
5 = Electricity
6 = Kerosense
7 = Crop residue/sawdust
8 = Animal waste
9 = Other (specify)

Code: ☐

21. How does your hosehold dispose of refuse?
1 = Collected
2 = Public dump (>>23)
3 = Dumped elsewhere (>>23)
4 = Burned by household (>>23)
5 = Buried by household (>>23)
6 = Other (>>23)

Code: ☐

22. How much does this household pay for refuse disposal?

Amount: ☐ Time Unit: ☐

23. What type of toilet is used by your household?
1 = Flush toilet (W.C) (>>25)
2 = Pit latrine (>>25)
3 = KVIP (>>25)
4 = Pan/bucket (>>25)
5 = Public toilet (flush/bucket/KVIP)
6 = Toilet in another house
7 = No toilet facility (bush, beach) (>>25)
8 = Other (specify) (>>25)

Code: ☐

24. How much does the household pay for the use of the toliet facility?

Amount: ☐ Time Unit: ☐

Question 8 codes:
1 = Indoor plumbing
2 = Inside standpipe
3 = Water truck/tanker service
4 = Water vendor
5 = Pipe in neighbouring household

6 = Private outside standpipe/tap
7 = Public standpipe
8 = Sachet/bottled water
9 = Borehole
10 = Protected well
11 = Unprotected well
12 = River / Stream
13 = Rain water / spring
14 = Dugout/pond/lake/dam
15 = Other (specify)

Distance codes:
0 = In house
1 = Yard
2 = Metre
3 = Km
4 = Mile

Time Units:
1 = Daily
2 = Weekly
3 = Monthly
4 = Quarterly
5 = Half yearly

6 = Yearly
0 = N/A

Section 12, Part A -- Housing Characteristics: Structure and Amenities

	Does the household have access to […]? 1= Yes 2 = No (i)	Does the household use […]? 1 = Yes 2 = No (ii)
25.a. Fixed Line Telephone		
25.b. Mobile phone network		
25.c. Personal Computers		
25.d. Internet (other use)		
25.e. E-commerce		
25.f. Paid cable network (e.g. M-NET CABLEGOLD)		

26. What is the main construction material used for the outer wall?
1 = Mud/Mud bricks
2 = Wood/Bamboo
3 = Metal sheet/Slate/Asbestos
4 = Stone
5 = Burned bricks
6 = Cement/Sandcrete blocks
7 = Landcrete
8 = Thatch
9 = Cardboard
10 = Other (specify)

Code

27. What is the main construction material used for the floor?
1 = Earth/Mud/Mud bricks
2 = Wood
3 = Stone
4 = Cement/Concrete
5 = Burnt bricks
6 = Vinyl tiles
7 = Ceramic/Marble/Tiles
8 = Terrazzo
9 = Other

Code

28. What is the main material used for the roof?
1 = Palm leaves/Raffia/Thatch
2 = Wood
3 = Corrugated iron sheets
4 = Cement/Concrete
5 = Asbestos/Slate
6 = Roofing tiles
7 = Mud bricks/Earth
8 = Bamboo
9 = Other (specify)

Code

Section 12, Part B -- Ownership of Durables

	1	Owned Now		Owned until a year ago (*specific date*)		Accquired between (*specific date*) and now							
	Item	2	3	4	5	Purchased		Sold		Given as gift		Received as gift	
		No.	Value	No.	Value	6 No.	7 Value	8 No.	9 Value	10 No.	11 Value	12 No.	13 Value
1	Radio, Cassette/CD player												
2	Telephone (mobile)												
3	Telephone (fixed)												
4	TV												
5	Parabolic/satellite receivers												
6	VCR / DVD Player												
7	Camera												
8	Video camera												
9	Refrigerator & freezers												
10	Air conditioners & air coolers												
11	Washing machines and driers												
12	Gas cookers, stoves, and coalpots												
13	Electric irons												
14	Electric fans												
15	Blenders												
16	Lanterns, gas lights												
17	Dining pots												
18	Utensils / cutlery												
19	Food Processor												
20	Sewing Machine												
21	Shovels, rakes, wheelbarrows, etc.												
22	Motor driven lawn mower												
23	Generators (houshold use)												

Section 12, Part B -- Ownership of Durables (ctd.)

	1	Owned Now		Owned until a year ago		Accquired between (*specific date*) and now							
		2	3	4	5	Purchased		Sold		Given as gift		Received as gift	
	Item	No.	Value	No.	Value	6	7	8	9	10	11	12	13
						No.	Value	No.	Value	No.	Value	No.	Value
24	Water cans / water pumps												
25	Brooms												
26	Light bulbs												
27	Car / truck												
28	Motorcycle												
29	Bicycle												
30	Computers and accessories												
31	Mattresses												
32	Room furniture												
33	Bedsheets & blankets												

Section 12, Part B -- House Property

To be asked to the Household head/part can be filled by surveyor as well

1	In what type of dwelling does the household live? 1= Separate house (bungalow) 2= Semi-detached house 3= Flat/Apartment 4= Room(s) (Compound House) 5= Rooms(s) (Other type) 6= Several Huts/Buildings (same Cpds) 7=Several Huts/Buildings (diff. Cpds) 8= Tents/Improvised home 9= Other (specify)	
2	How many rooms does this household occupy? (count living rooms, dining rooms, bed rooms but not bathrooms, toilet & kitchen)	
3	Do other households share this dwelling with you (1= yes, 2= no)	
4	What is your present occupancy status? (1=Owning, 2=Renting, 3=Rent-free, 4=Perching) If owning >> 6	
5	Who owns this dwelling? (1=Relative not household member, 2=Other private individual, 3=Private employer, 4=Other private agency, 5=Public/Gov't. ownership, 6=Other (specify))	
6	What is the condition of the house in which the household is living? (1=good, 2=livable, 3=badly damaged)	
7	How are the surroundings of the house? (1=clean, 2=average, 3=dirty)	
8	Is there a room used exclusively for cooking? (1=yes, 2=no)	
9	Is there a window in the room where cooking is done? (1=yes, 2=no)	
10	Is there a chimney/smoke outlet in the cooking place? (1=yes, 2=no)	
11	Is cooking done outside in any season? (1=yes, 2=no)	
12	If yes, which season?	
13	Does your house have electricity? (1=yes, 2=no)	
14	If yes, how regular is your power supply after sunset? (1=regular, 2=cut once or twice a week, 3=cut more than twice a week)	
15	Distance to nearest public toilet (kms)	
16	Average time spent traveling to and waiting at public toilet (minutes)	
17	Number of other buildings owned	
18	Number of vacant plots owned	
19	Where are animals tied at night? (1=inside the house, 2=outside the house, 3=animal shed, 9=no animals)	
20	Where are animals tied during the day? (1=inside the house, 2=outside the house, 3=animal shed, 9=no animals)	
21	Where is hay(grass) kept? (1=inside the house, 2=outside the house, 3=animal shed, 9=no hay)	
22	Open sewer/drain in/around the house? (1=yes, 2=no)	
23	Trash in/around the house? (1=yes, 2=no)	

Section 12, Part B -- Fuels Used in the Past 12 Months

1	2	3	4		5	6
Sl. No.	Fuel type	No. of months used	Avg. value per months		Home produced/ collected	Purchased
			GH¢	P	GH¢	GH¢
1	Electricity				*********	
2	Gas for household use				*********	
3	Kerosene				*********	
4	Charcoal					
5	Firewood and other solid fuels					
6	Petrol				*********	
7	Diesel				*********	
8	Dung Cake					
9	Crop byproducts/waste					
10	Rubbish/plastic			*********		*********

Section 12, Part C -- Expenditures

		Expenditure during the last week		Expenditure during the last 12 months	
		GH¢	P	GH¢	P
1	Meat and poultry				
2	grains, cereals, and nuts				
3	fruits and vegetables				
4	Milk and eggs				
5	Beverages (bottled water, tea, coffee, soft drinks, juices, alcoholic)				
6	Female's clothes				
7	Male's clothes				
8	Children's clothes				
9	Adult shoes				
10	Children's shoes				
11	Newspapers, magazines, books				

Section 13, Part A - THP Participation

Ask of each adult in the household (16+)

Member ID	1	2	3	4	5	6	7
	Have you heard of the Hunger Project? 1 = Yes 2 = No (>> part b)	Have you ever attended any VCA (Vision, Commitment and Action) workshops? 1 = Yes 2 = No (>> 4)	If yes, how many have you attended in the past 12 months?	Have you ever attended any literacy classes organized by THP? 1 = Yes 2 = No (>> 6)	If yes, how many have you attended in the past 12 months?	Have you ever attended any women's empowerment workshops (on women's rights, child maintenance, domestic violence, reproductive health, etc) organized by THP ? 1 = Yes 2 = No (>> 8)	If yes, how many have you attended in the past 12 months?
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							

TIME UNIT CODES: 1 = daily; 2 = weekly; 3 = fortnightly; 4 = monthly; 5 = quarterly; 6 = year

8	9	10	11	12	13	14	15	16	17
Have you ever attended any HIV/AIDS workshops organized by THP? 1 = Yes 2 = No (>> 10)	If yes, how many have you attended in the past 12 months?	Have you ever attended any agricultural training sessions organized by THP? 1 = Yes 2 = No (>> 12)	If yes, how many have you attended in the past 12 months?	Have you ever attended any skill training sessions organized by THP other than the agricultural sessions? 1 = Yes 2 = No (>> 14)	If yes, how many have you attended in the past 12 months?	Are you a member of a THP loan group? 1 = Yes 2 = No (>> 16)	How many loans have you obtained from the THP credit union in the past 12 months?	Do you serve on a THP committee? 1 = Yes 2 = No (>> 18)	If yes, which one? 1 = epicenter committee 2 = THP village committee 3 = health / clinic committee 4 = credit / loan committee 5 = food bank committee 6 = conference room committee 7 = library / educational committee

·ly

Section 13, part a - THP Participation (ctd.)

Ask of each adult in the household (16+)

Member ID	18	19		20	21	22	23	
	Do you know of an epicenter building (completed or under construction) in this area? 1= Yes 2= No (>> part b)	How far away is the nearest epicenter building? Code "999" if not known		Have you contributed any of your time to the construction of the epicenter? 1 = Yes 2 = No (>> 22)	If yes, how many days have you worked on the construction of the epicenter?	Have you contributed any of your money or any items in kind to the construction of the epicenter? 1 = Yes 2 = No (>> 24)	If yes, what is the total value of these contributions?	
		miles	Km		Days		GH¢	P
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								

24	25	26	27	28	29	30	31
Have you attended any harvests / fundraising activities to generate funds for the epicenter construction? 1 = Yes 2 = No (>> 26)	How many times did you go to the epicenter in the past month? *Zero value possible* Number of visits	Have you ever visited the epicenter clinic to receive medical services? 1 = Yes 2 = No (>> 29)	If yes, which services? 1 = treatment of ailment 2 = antenatal / postnatal care 3 = supervision of delivery 4 = immunizations 5 = family planning (list all that apply)	How many times have you been to the epicenter clinic in the past 12 months?	Have you ever used the Food Bank at the community epicenter? 1 = Yes 2 = No (>> part b)	If yes, what use have you made of the Food Bank? 1 = storage of farm produce 2 = purchase of food items	How many times have you used the Food Bank in the past 12 months?

Section 13, part b - Empowerment (1/4)

Ask of each adult in the household (16+)

Member ID	1	2	3	4	5	6	7	8	9	10	CODES FOR COLUMN 6
	In the past 12 months, how many times have you traveled to a neighboring village or town? *(zero values possible)*	Which of the following statements is closest in your view? 1 = There is no sense in trying to start a new business because many enterprises lose money. 2 = If a person has a good idea for a business, they should invest their own savings or borrow money to try to make it succeed.	Do you feel that people like yourself can generally change things in your community if they want to? 1 = Yes, very easily 2 = Yes, fairly easily 3 = Yes, but with a little difficulty 4 = Yes, but with a great deal of difficulty 5 = No, not at all	If I disagree with something that my neighbor is doing or saying, I keep quiet. 1 = Always true 2 = Generally true 3 = Sometimes true 4 = Rarely true 5 = Never true	In the past year, have you contributed any time to help construct or maintain any public good (church, community garden, public toilet, etc) other than one associated with the epicenter? 1 = Yes 2 = No (>>11)	What type of public good is it? (list all that apply, see codes at left)	About how many weeks in total did you work for this good(s)?	While you were working, how many hours per week did you work on average for this good(s)?	Did you contribute either goods or money for this public good? 1 = yes 2 = no (>>11)	About how much money total did you contribute for this public good? (GHC)	1 = Health clinic 2 = School 3 = Religious institution 4 = Irrigation or other farm system 5 = Water/wells 6 = Youth club 7 = Women's group 8 = Self-help group 9 = ROSCA 10 = Recreational (e. g. football field) 11 = Other community center 12 = Electricity 13 = Public toilet 14 = other (specify)
1											
2											
3											
4											
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Section 13, part b - Empowerment (2/4)

Ask of each adult in the household (16+)

Member ID	11	12	13	14		15	16	17	18		19	20	21	Let's say that [important public good in the community] was damaged in a storm. Do you agree or disagree with the following statements? *(only ask head and spouse)* 1 = strongly agree 2 = agree 3 = neither agree nor disagree 4 = disagree 5 = strongly disagree			
	Were you eligible to vote in the last **national** elections? 1 = yes 2 = no	Did you vote in the last **national** elections? 1 = Yes 2 = No	Last month, how frequently did you discuss **national** politics with people outside your family? 0 = none (>> 15) 1 = once or twice 2 = about once a week 3 = every day or almost every day	Whom (outside your family) did you discuss **national** politics with? *List codes from village roster, separating with commas*		Which political party do you most often agree with? 1 = NDC 2 = NPP 3 = neither 8 = don't know 9 = don't wish to say ADD RELEVANT OTHERS	Were you eligible to vote in the last **District Assembly** elections? 1 = Yes 2 = No	Did you vote in the last **District Assembly** elections? 1 = Yes 2 = No	Whom (outside your family) did you discuss **current events in the community** with? *List codes from village roster, separating with commas*		Which of the following statements do you agree with: 1 = As a community, we are generally able to make our political representatives listen to our problems. 2 = As a community, we are generally unable to make our political representatives listen to our problem	If I disagree with something that the village chief is doing or saying, I keep quiet. 1 = Always true 2 = Generally true 3 = Sometimes true 4 = Rarely true 5 = Never true	Do you agree with the following statement: Once a decision is endorsed at the village meeting/people's assembly, it will get executed in a timely fashion. 1 = Always agree 2 = Generally agree 3 = Sometimes agree 4 = Rarely agree 5 = Never agree	22	23	24	25
				HH ID	Person ID				HH ID	Person ID				If I contribute time, money, or other resources to repair the [public good], my example will encourage others to contribute as well.	Even if my neighbors and I worked together to repair the [public good], we lack the skills, the finances, or other resources to repair it.	If I lack the skills or resources to repair the [public good], I can find someone with the right skills or resources that will help repair the [public good]?	If most of my neighbors contributed their time or money or other resources to repairing the [public good], those who were healthy but chose not to contribute would feel ashamed.
1																	
2																	
3																	
4																	
5																	
6																	
7																	
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Section 13, part b - Empowerment (3/4) – INTRAHOUSEHOLD / GENDER QUESTIONS

Ask of each adult in the household (16+)

Member ID	ONLY ASK MALE HEAD OF HOUSEHOLD AND SPOUSE								FOR FEMALES ONLY										
	26	27		Who paid for the LAST purchase of [item] in your household? 1 = Head of household 2 = Spouse of head of household 3 = Both head and spouse 4 = Another female in the household 5= Another male in the household 6 = Other combination of household members					33	34	35	36	37	38		39	40	41	42
	Is there chop money given from the male household head to his spouse? 1 = yes 2 = no (>>28)	How much chop money is given per week? CEDIS and Pesewas		28	29	30	31	32	Overall, how much do you trust your spouse? 1 = Completely 2 = A lot 3 = Some 4 = A little 5 = Not at all 87 = not married (>> 40)	Can you go visit friends without the permission of your husband? 1 = yes 2 = no	Have you ever practiced birth control without the permission (consent) of your husband? 1=yes 2=no	In the past 12 months, have you ever been forced to have sex when you did not want to? 1 = yes 2=no (>>38)	How often are you forced to have unwanted sex? 1 = Never 2 = Rarely 3 = Occasionally 4 = Almost always 5=Every time	How long have you known your husband before you married him?		for Interviewer: was male spouse present while this was asked? Y=1 N=2	Which of the following statements do you agree more with? A: Women should have the same chance of being elected to political office as men B: Men make better leaders than women, and should be elected rather than women. 1 = very strongly agree with A 2 = somewhat agree with A 3 = somewhat agree with B 4 = very strongly agree with B	How much do you know about The Marriage Act? 1 = Never heard of it 2 = Heard of it but don't know anything about it 3 = Know a little about it 4 = Know some about it 5 = Know it very well	How much do you know about PNDC Law 111? 1 = Never heard of it 2 = Heard of it but don't know anything about it 3 = Know a little about it 4 = Know some about it 5 = Know it very well
		GH¢	P	Food for household	Large items for household (e. g. a repair on the roof)	Children's schooling expenses	Children's medicine	Special events (e.g. festivals)						years	months				
1																			
2																			
3																			
4																			
5																			
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18																			

Section 13, part b - Empowerment (4/4) – LOCAL GOVERNMENT QUESTIONS

Ask of each adult in the household (16+)

Member ID	How often in a year do you speak with the following individuals? 1 = Never 2 = Once 3 = Every other month 4 = Every month 5 = Every week 6 = Every day					How well or badly would you say your local government is handling the following matters? 1 = Very well 2 = Fairly well 3 = Somewhat well 4 = A little well 5 = Not well at all 6 = Don't know/haven't heard				How much do you trust each of the following? 1 = Completely 2 = A lot 3 = Some 4 = A little 5 = Not at all 87 = Don't know/haven't heard of them								
	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60
	District Assemblyman	Village Chief	Family Head	Friend in the same village	Friend in neighboring village	Maintaining the roads	Keeping the community clean	Collecting local taxes	Deciding on how to spend local revenues	The President	Official government minister	District Assemblyman	Village chief	Religious leader	Neighbor from same village	Neighbor from nearby village	People from your own tribe	People from a different tribe
1																		
2																		
3																		
4																		
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17																		
18																		

Section 13, Part c – Community Participation

Ask of each adult in the household (16+)

Organization Number	1 Do you participate in or are you a member of any social, political or religious organi-zations? 1 = yes 2 = no (if no >> 5)	2 List the social, political, and religious organizations that you belong / participate in *(give the Organization ID from organization roster in village survey)*	3 Of these organizations, list the ones that you spent more than five hours last month working with *(give the Organization ID from organization roster in village survey)*	4 Of these organizations, list the ones that you have a leadership role in *(give the Organization ID from organization roster in village survey)* *>> 7*	5 What is the main reason why you don't participate? 1 = I don't have enough time (>> 7) 2 = I don't think they are worthwhile (>> 7) 3 = I don't feel welcome/included 4 = Other	6 Why don't you feel welcome/included? (list all that apply) 1 = poverty 2 = occupation 3 = lack of education 4 = gender 5 = age 6 = religion 7 = political affiliation 8 = ethnicity/language 9 = other (specify)	7 Did you attend the previous community [general] meeting on [date]? 1 = yes 2 = no *(give date from village survey)*	8 If yes, did you speak about any issue at the meeting? 1 = yes 2 = no (if no >> next section)	9 What was/were this issue(s)? (see codes at right) list all, separating with commas	**CODE FOR COLUMN 9:** **1 = road or transport** **2 = health** **3 = education** **4 = irrigation or water** **5 = other agriculture related** **6 = ceremonies** **7=disputes** **8 = sanitation** **9 = construction other than roads or irrigation** **10 = access to and use of lands of the assembly** **11 = unemployment schemes** **12 = other (specify)**
1										
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3										
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Section 14, Part a: Digit Span Cognitive Assessment

Complete for each child between ages 5 - 12 in the household. Complete Part 1 first.

IF THERE IS MORE THAN ONE RESPONDENT SEPARATE THE CHILDREN'S IDs BY COMMAS AND SEPARATE THEIR ANSWERS BY COMMAS IN THE ANSWER BOXES. MAKE SURE YOU USE THE SAME RESPONDENT ORDER THROUGHOUT THIS SECTION

Child name:_____ Child Household ID:_____

Instructions:
(1) Read each digit span only once at an even rate of one digit per second.
(2) Read Part A of a question; pause for response, then score.
(3) Read Part B of a question; pause for response; then score.
(4) If child does not respond after reading the question, do not encourage further.
(5) Stop when child misses Part A and Part B of any one question.
(6) To be scored as "correct", no digits may be omitted or be in reversed order.

Part 1: Digits Forward

Read outloud to child: "I can only read these instructions to you one time. I cannot repeat them. I am going to say some numbers. Listen carefully, and when I am through, say them right after me"

0. Exact Time Now _____

	Say "Ready", then say:	Correct response: 1 = Child repeated the numbers *exactly* 0 = Child did not repeat the numbers *exactly*
Q1(a)	"2-9"	
Q1(b)	"4-6"	

If the child got both questions wrong >> Part 2

	Say "Ready", then say:	Correct response: 1 = Child repeated the numbers *exactly* 0 = Child did not repeat the numbers *exactly*
Q2(a)	"3-8-6"	
Q2(b)	"6-1-2"	

If the child got both questions wrong >> Part 2

	Say "Ready", then say:	Correct response: 1 = Child repeated the numbers *exactly* 0 = Child did not repeat the numbers *exactly*
Q3(a)	"3-4-1-7"	
Q3(b)	"6-1-5-8"	

If the child got both questions wrong >> Part 2

	Say "Ready", then say:	Correct response: 1 = Child repeated the numbers *exactly* 0 = Child did not repeat the numbers *exactly*
Q4(a)	"8-4-2-3-9"	
Q4(b)	"5-2-1-8-6"	

If the child got both questions wrong >> Part 2

	Say "Ready", then say:	Correct response: 1 = Child repeated the numbers *exactly* 0 = Child did not repeat the numbers *exactly*
Q5(a)	"3-8-9-1-7-4"	
Q5(b)	"7-9-6-4-8-3"	

If the child got both questions wrong >> Part 2

	Say "Ready", then say:	Correct response: 1 = Child repeated the numbers *exactly* 0 = Child did not repeat the numbers *exactly*
Q6(a)	"5-1-7-4-2-3-8"	
Q6(b)	"9-8-5-2-1-6-3"	

If the child got both questions wrong >> Part 2

	Say "Ready", then say:	Correct response: 1 = Child repeated the numbers *exactly* 0 = Child did not repeat the numbers *exactly*
Q7(a)	"1-6-4-5-9-7-6-3"	
Q7(b)	"2-9-7-6-3-1-5-4"	

If the child got both questions wrong >> Part 2

	Say "Ready", then say:	Correct response: 1 = Child repeated the numbers *exactly* 0 = Child did not repeat the numbers *exactly*
Q8(a)	"5-3-8-7-1-2-4-6-9"	
Q8(b)	"4-2-6-9-1-7-8-3-5"	

>> Part 2

Section 14, Part a: Digit Span Cognitive Assessment (concluded)

Complete for each between under ages 5 - 12 in the household. Complete Part 1 first.

Part 2: Digits Backward

Read outloud to child: "Now, I am going to say some more numbers, but this time when I stop, I want you to say them backward. For example, If I say 9-2-7, what would you say?"

If child says "7-2-9", say: "That's right. Let's go on with the rest of the numbers"

If child does not say "7-2-9", say: "No, you would say 7-2-9. I said 9-2-7, so to say it backwards you would say 7-2-9. Now try these numbers. Remember to say them backward."

	Say "Ready", then say:	*Answer: DO NOT READ*	Correct response: 1 = Child repeated the answer *exactly* 0 = Child did not repeat the answer *exactly*
Q9(a)	"2-5"	"5-2"	
Q9(b)	"6-3"	"3-6"	

If the child got both questions wrong >> Question 16

	Say "Ready", then say:	*Answer: DO NOT READ*	Correct response: 1 = Child repeated the answer *exactly* 0 = Child did not repeat the answer *exactly*
Q10(a)	"5-7-4"	"4-7-5"	
Q10(b)	"2-5-9"	"9-5-2"	

If the child got both questions wrong >> Question 16

	Say "Ready", then say:	*Answer: DO NOT READ*	Correct response: 1 = Child repeated the answer *exactly* 0 = Child did not repeat the answer *exactly*
Q11(a)	"7-2-9-6"	"6-9-2-7"	
Q11(b)	"8-4-9-3"	"3-9-4-8"	

If the child got both questions wrong >> Question 16

	Say "Ready", then say:	*Answer: DO NOT READ*	Correct response: 1 = Child repeated the answer *exactly* 0 = Child did not repeat the answer *exactly*
Q12(a)	"4-1-3-5-7"	"7-5-3-1-4"	
Q12(b)	"9-7-8-5-2"	"2-5-8-7-9"	

If the child got both questions wrong >> Question 16

	Say "Ready", then say:	*Answer: DO NOT READ*	Correct response: 1 = Child repeated the answer *exactly* 0 = Child did not repeat the answer *exactly*
Q13(a)	"1-6-5-2-9-8"	"8-9-2-5-6-1"	
Q13(b)	"3-6-7-1-9-4"	"4-9-1-7-6-3"	

If the child got both questions wrong >> Question 16

	Say "Ready", then say:	*Answer: DO NOT READ*	Correct response: 1 = Child repeated the answer *exactly* 0 = Child did not repeat the answer *exactly*
Q14(a)	"8-5-9-2-3-4-2"	"2-4-3-2-9-5-8"	
Q14(b)	"4-5-7-9-2-8-1"	"1-8-2-9-7-5-4"	

If the child got both questions wrong >> Question 16

	Say "Ready", then say:	*Answer: DO NOT READ*	Correct response: 1 = Child repeated the answer *exactly* 0 = Child did not repeat the answer *exactly*
Q15(a)	"6-9-1-6-3-2-5-8"	"8-5-2-3-6-1-9-6"	
Q15(b)	"3-1-7-9-5-4-8-2"	"2-8-4-5-9-7-1-3"	

16: Exact Time Now _____

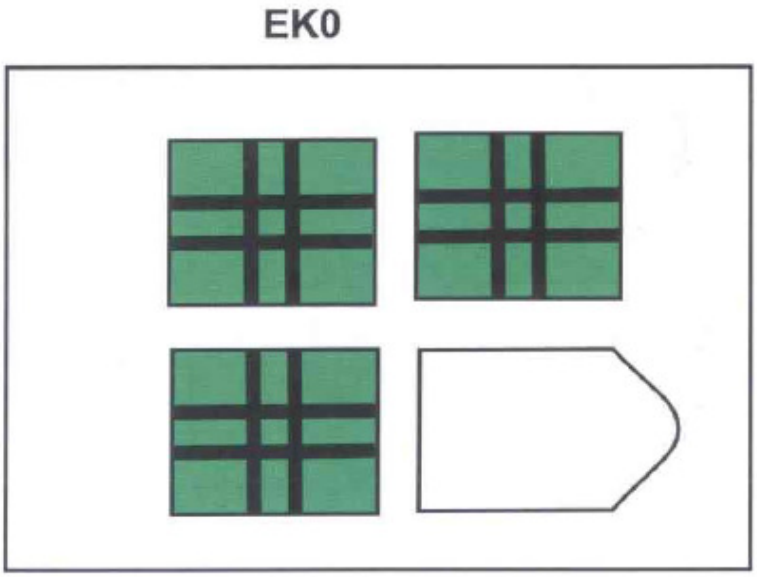
Section 14, Part b: Raven's Pattern Cognitive Assessment (page 1 / 7)

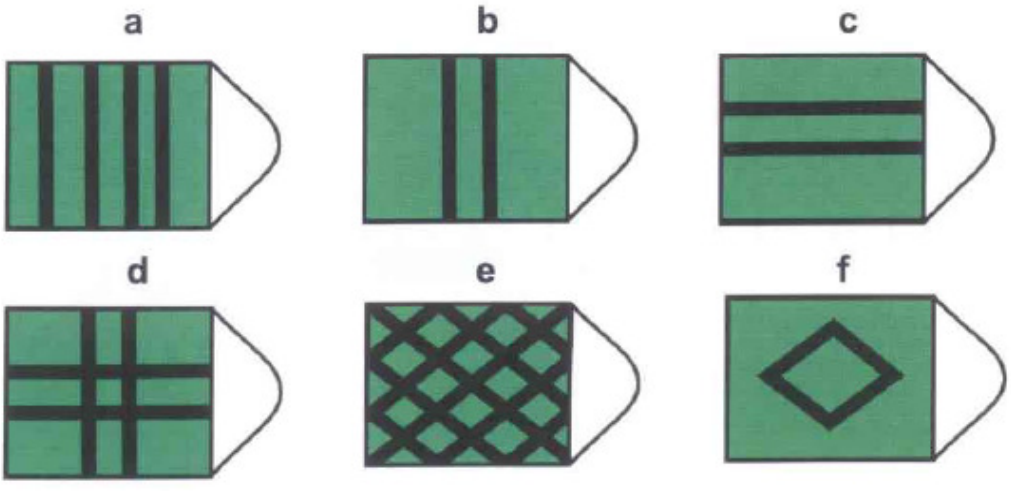
Complete for each child between ages 5 - 12 in the household.

Child name:_____ Child Household ID:_____

Instructions:
Show the picture below to the child and have them point to one of the shapes labeled (a) - (f)
Record below the pictures which shape the child pointed to.

Example
Show the child the picture and then point to shape d





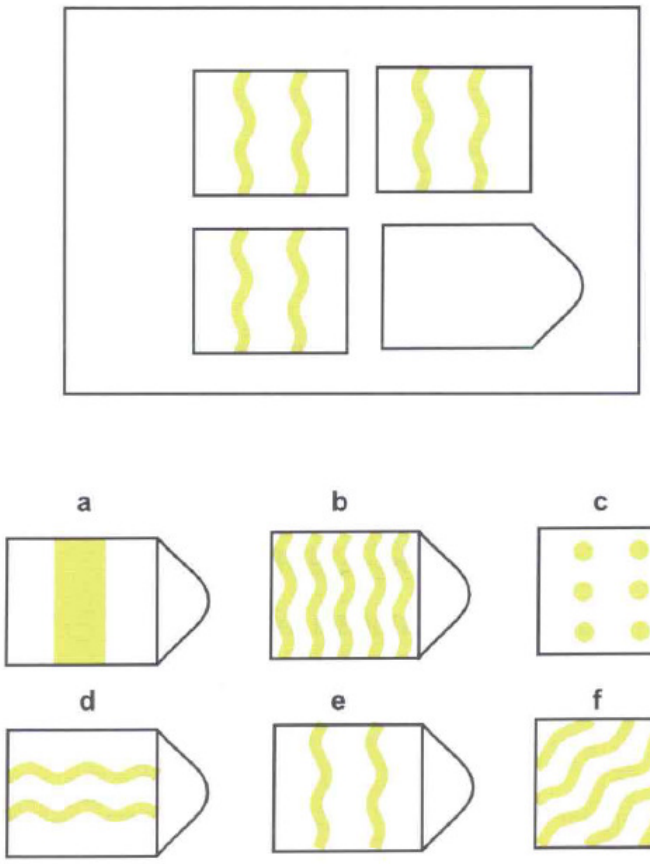
Section 14, Part b: Raven's Pattern Cognitive Assessment (page 2 / 7)

Complete for each child between ages 5 - 12 in the household.

Child name:_____ Child Household ID:_____

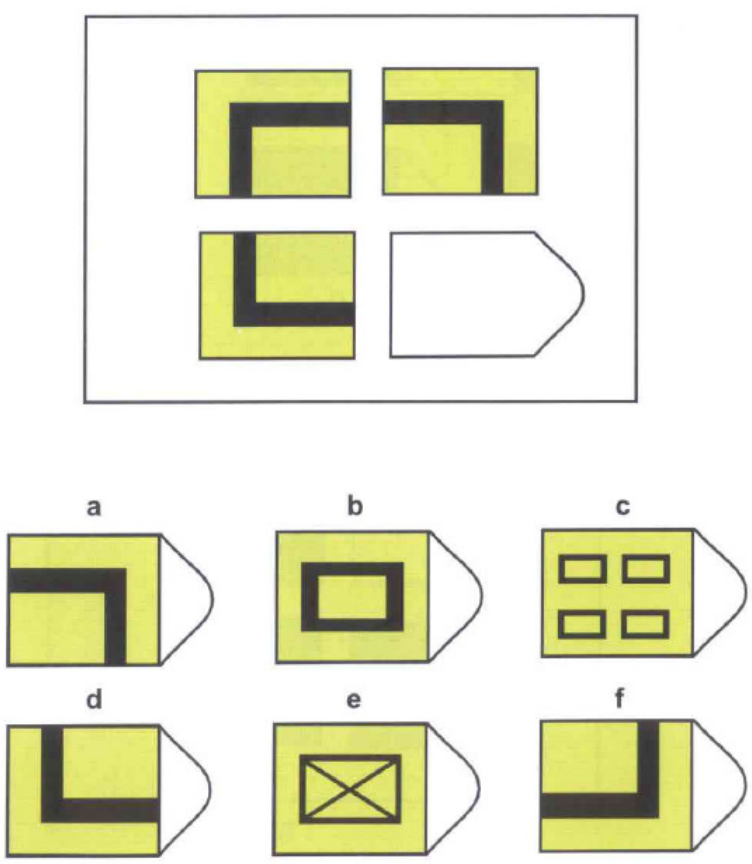
Instructions:
Show the picture below to the child and have them point to one of the shapes labeled (a) - (f)

EK1



EK1. Shape pointed to _____

EK2



EK2. Shape pointed to _____

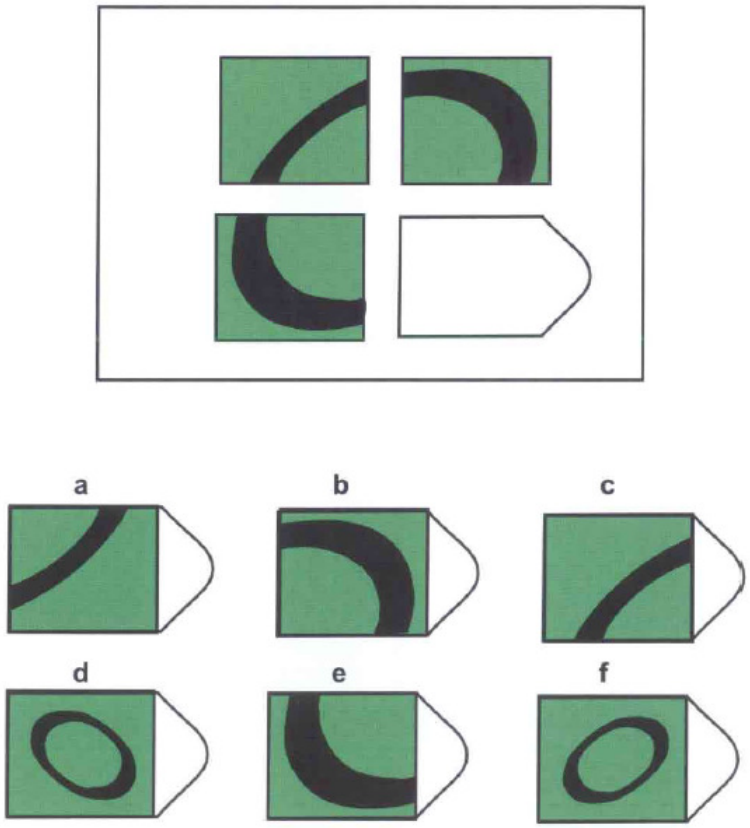
Section 14, Part b: Raven's Pattern Cognitive Assessment (page 3 / 7)

Complete for each child between ages 5 - 12 in the household.

Child name:_____ Child Household ID:_____

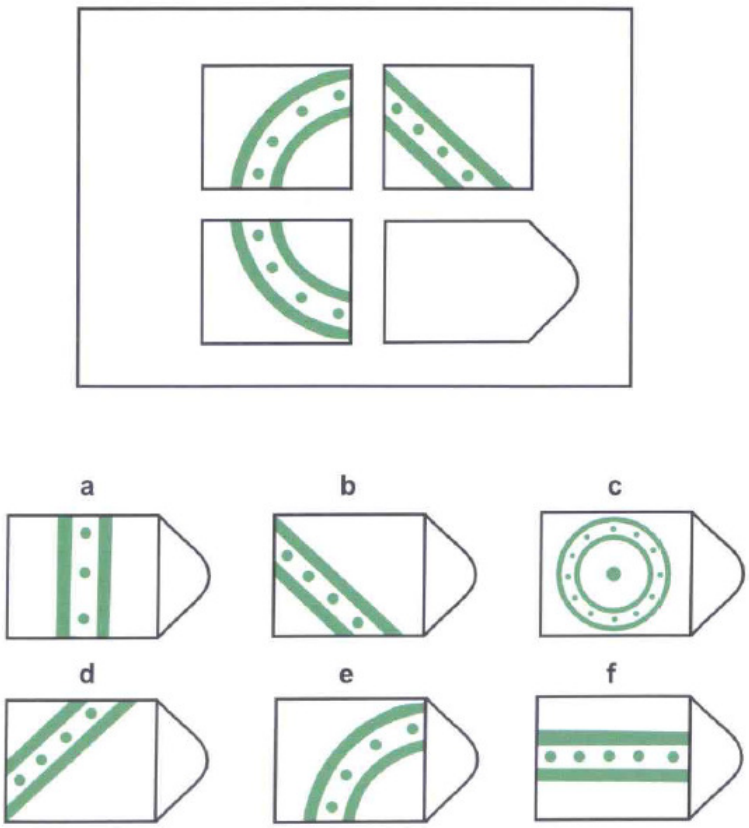
Instructions:
Show the picture below to the child and have them point to one of the shapes labeled (a) - (f)

EK3



EK3. Shape pointed to _____

EK4



EK4. Shape pointed to _____

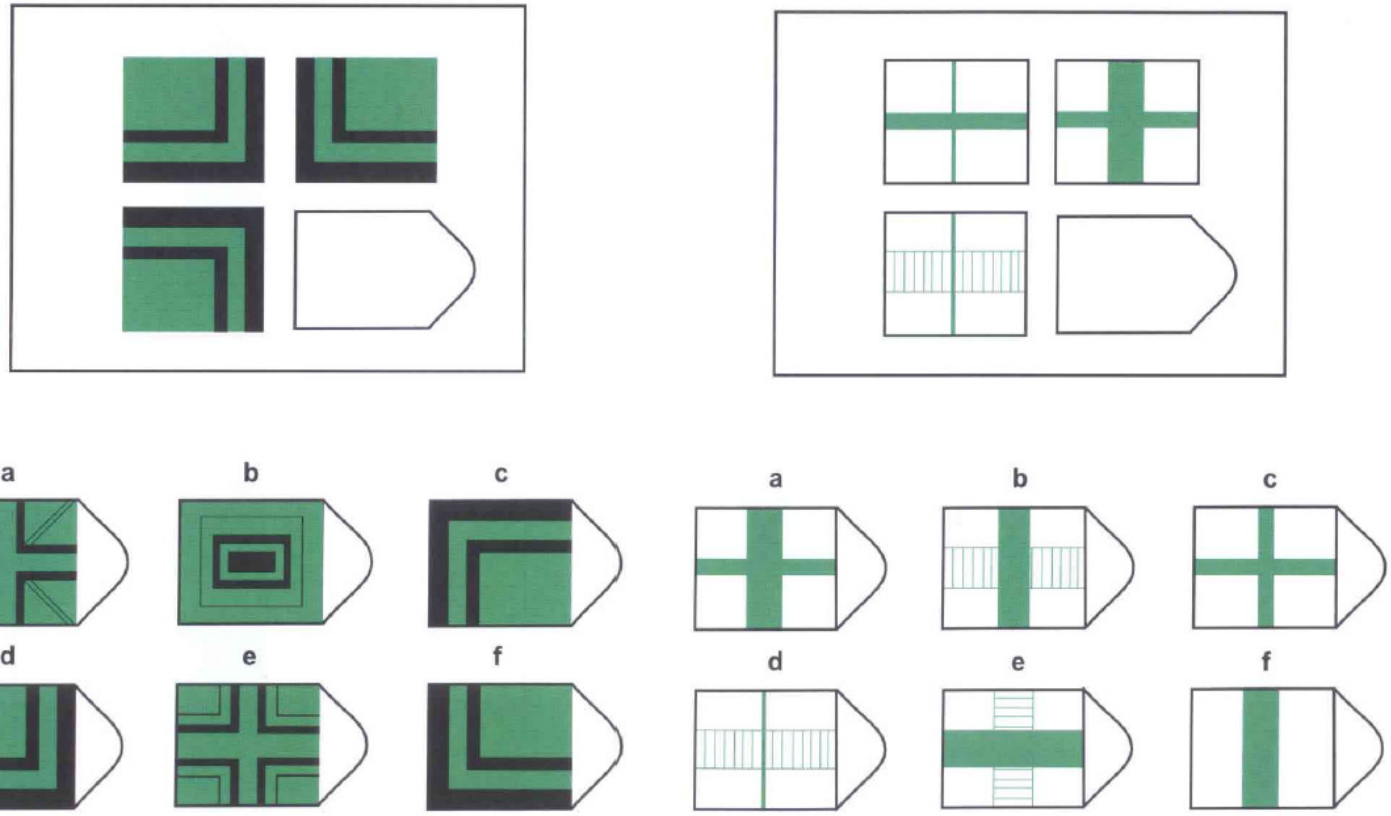
Section 14, Part b: Raven's Pattern Cognitive Assessment (page 4 / 7)

Complete for each child between ages 5 - 12 in the household.

Child name:_____ Child Household ID:_____

Instructions:
Show the picture below to the child and have them point to one of the shapes labeled (a) - (f)

EK5



EK6

EK5. Shape pointed to _____

EK6. Shape pointed to _____

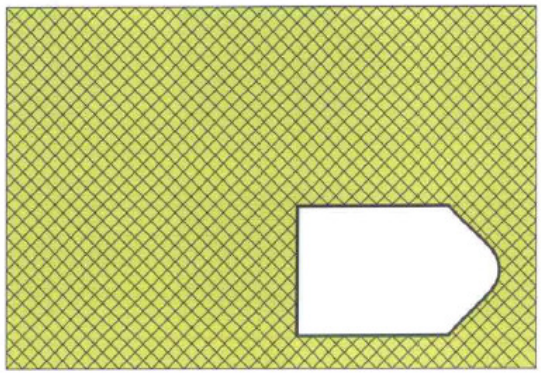
Section 14, Part b: Raven's Pattern Cognitive Assessment (page 5 / 7)

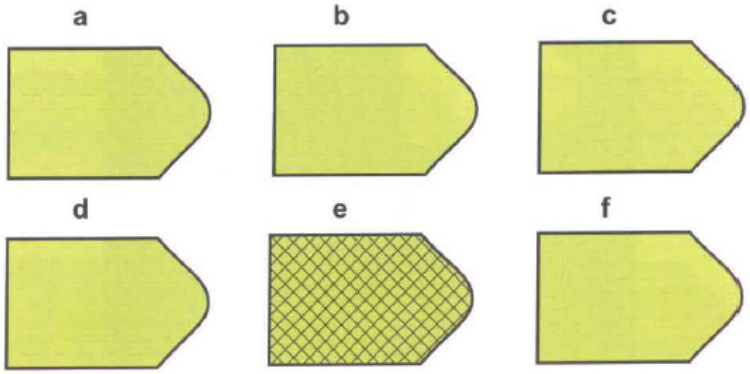
Complete for each child between ages 5 - 12 in the household.

Child name:_____ Child Household ID:_____

Instructions:
Show the picture below to the child and have them point to one of the shapes labeled (a) - (f)

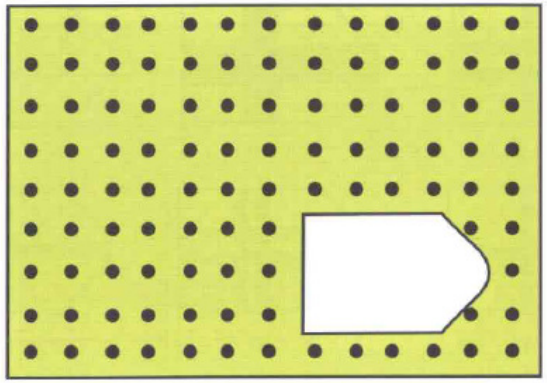
EK7

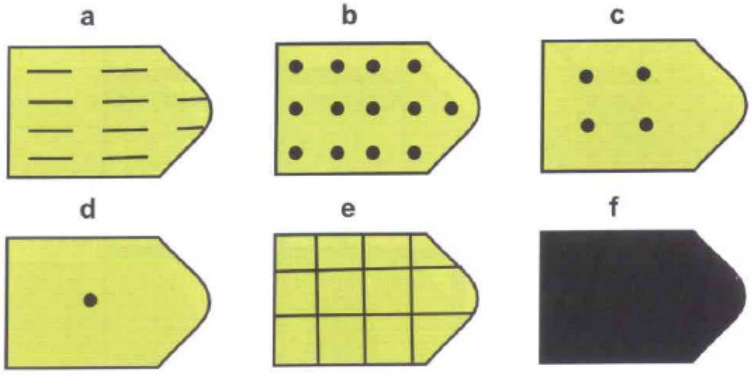




EK7. Shape pointed to _____

EK8





EK8. Shape pointed to _____

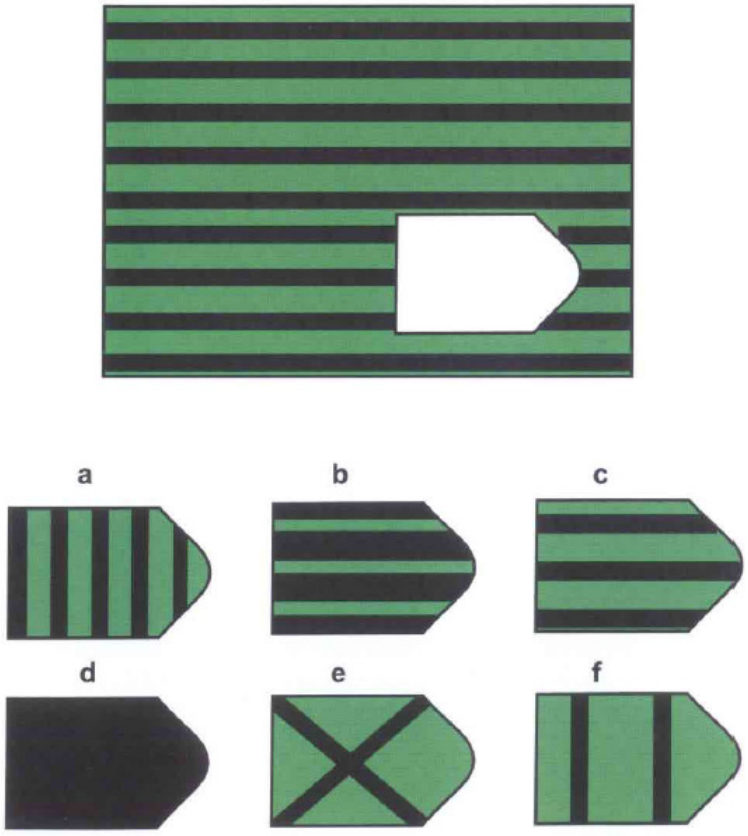
Section 14, Part b: Raven's Pattern Cognitive Assessment (page 6 / 7)

Complete for each child between ages 5 - 12 in the household.

Child name:_____ Child Household ID:_____

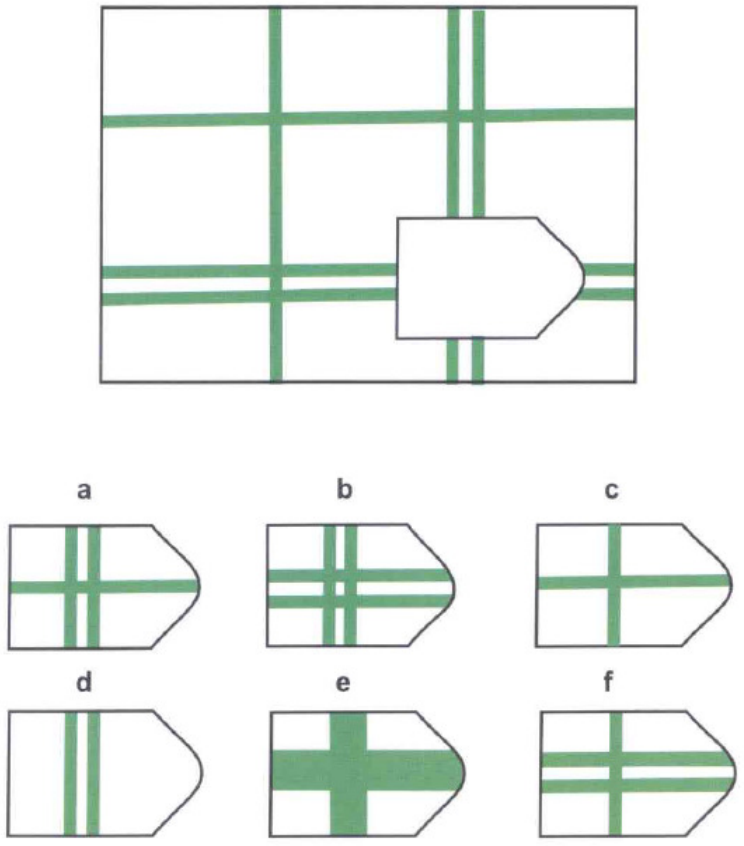
Instructions:
Show the picture below to the child and have them point to one of the shapes labeled (a) - (f)

EK9



EK9. Shape pointed to _____

EK10



EK10. Shape pointed to _____

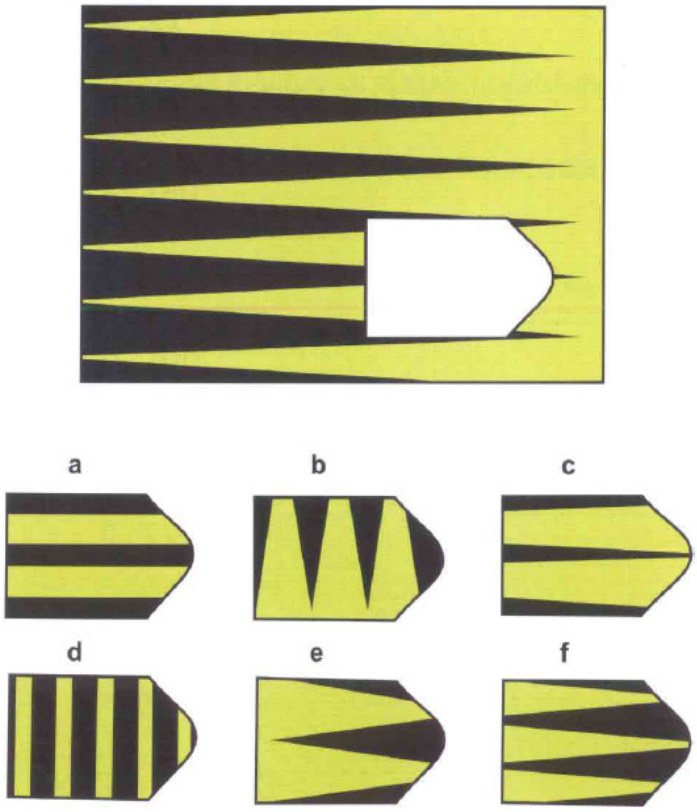
Section 14, Part b: Raven's Pattern Cognitive Assessment (page 7 / 7)

Complete for each child between ages 5 - 12 in the household.

Child name:_____ Child Household ID:_____

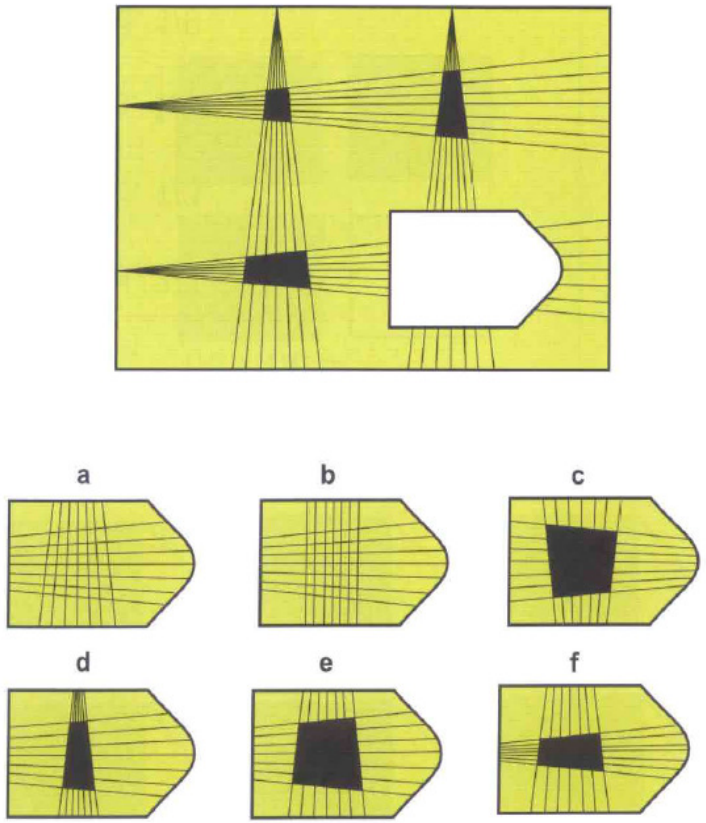
Instructions:
Show the picture below to the child and have them point to one of the shapes labeled (a) - (f)

EK11



EK11. Shape pointed to _____

EK12



EK12. Shape pointed to _____