REFERENCE NUMBER: [__|__]-[__]-[__|__]-[__|__]-[__]-[__|__]

SURVEY OF HOUSEHOLD WELFARE AND LABOUR IN TANZANIA
(SHWALITA)

HOUSEHOLD IDENTIFICATION			
1a. Region ID: [__|__]	1b. Region: _____		
2a. District ID: [__]	2b. District: _____		
3a. Cluster ID: [__|__]	3b. Kitongoji/street: _____		
4a. Household ID: [__|__]	4b. Name household head: _____		
4c. Type of questionnaire (see overleaf):_____	4d. Booklet No. / out of [__] / [__]		
5a. Is this household … 1=An originally selected household? (>>6) 2=A replacement household ? [__]		5b. What was the originally selected Household ID?	[__|__]

6. GPS Coordinates	S [__|__] º	[__|__] ·	[__|__|__] ´	
	E [__|__|__] º	[__|__] ·	[__|__|__] ´	

INTERVIEWER'S VISITS			
	VISIT #1	VISIT #2	VISIT #3
7. Date (dd/mm/yy):	[__|__]/[__|__]/[__|__]	[__|__]/[__|__]/[__|__]	[__|__]/[__|__]/[__|__]
8a. Time (hh:mm) Starting:	[__|__]:[__|__] [__|__]	[__|__]:[__|__] [__|__]	[__|__]:[__|__] [__|__]
8b. Time (hh:mm) Finished:	[__|__]:[__|__] [__|__]	[__|__]:[__|__] [__|__]	[__|__]:[__|__] [__|__]
9. Interviewer name & ID	_____ [__|__|__]	_____ [__|__|__]	_____ [__|__|__]
10a. Interview result:	[__]	[__]	[__]

Result codes for Q10a:	1=COMPLETED>>12	3=REFUSED	5=HOUSEHOLD UNKNOWN	8=OTHER, SPECIFY:
	2=PARTIALLY COMPLETED>>11	4=HOUSEHOLD NO LONGER EXISTS	6=TEMPORARILY ABSENT	_____

10b. What is the source of this information?		10c. Write ID number for a replacement household	
11. Next visit, if planned:	Date: _____	Date: _____	
	Time: _____	Time: _____	
12a. Has anyone in this household ever participated in a survey like this one?	1=Yes 2=No (>>13)		[__]
12b. During which year was the last time the household participated in a survey like this one?	(YEAR)		[__ __ __ __]
13. Language of interview:	[__]	1=KISWAHILI 2=OTHER, SPECIFY: _____	
14. Was an interpreter used?	[__]	1=Yes 2=No	
15. Who responded for Sections 1-3 in the questionnaire? RECORD THEIR ID CODE HERE.			[__|__]

QUESTIONNAIRE VERIFICATION			
	a. SUPERVISOR	b. RECEIVED IN OFFICE BY	c. CHECKED BY	d. ENTERED BY
16. Initials	_____	_____	_____	_____
17. ID Code	[__|__|__]	[__|__|__]	[__|__|__]	[__|__|__]
18. Date	[__|__]/[__|__]/[__|__]	[__|__]/[__|__]/[__|__]	[__|__]/[__|__]/[__|__]	[__|__]/[__|__]/[__|__]

List of modules	Type	Questionnaire Id
Short prox + Long 14	With labour	11
	Without Labour	12
Short Self + Long 7 recall	With labour	21
	Without Labour	22
Long Prox + Subset 7 recall	With labour	31
	Without Labour	32
Long Self + Collapsed 7 recall	With labour	41
	Without Labour	42
Usual 12 months recall	Without Labour	51
Household Diary	Frequent	61
	Infrequent	62
Personal Diary	Frequent	63

SECTION 1: HOUSEHOLD ROSTER

1. ID CODE	2. NAME	3. What is sex of [NAME]?	4. What is the relationship of [NAME] to household head?	5. How old is [NAME]?	6. Can [NAME] read and write?	7. Has [NAME] ever attended school?	8. What is the highest level of education [NAME] has completed?	9. Has [NAME] ever attended a professional, technical or vocational school?	10. IS [NAME] 12 YEARS OR OLDER?
	MAKE A COMPLETE LIST OF ALL INDIVIDUALS WHO NORMALLY LIVE AND EAT THEIR MEALS TOGETHER IN THIS HOUSEHOLD, STARTING WITH THE HEAD OF HOUSEHOLD.	MALE. .1 FEMALE.2	HEAD....................1 WIFE/HUSBAND............2 CHILD/ADOPTED CHILD.....3 GRANDCHILD..............4 NIECE/NEPHEW............5 FATHER/MOTHER...........6 SISTER/BROTHER..........7 SON/DAUGHTER-IN-LAW.....8 BROTHER/SISTER-IN-LAW...9 GRANDFATHER/MOTHER.....10 FATHER/MOTHER-IN-LAW...11 OTHER RELATIVE........12 SERVANT OR SERVANT'S RELATIVE.............13 LODGER/LODGER'S RELATIVE.............14 NON-RELATIVE.....15 OTHER (SPECIFY)........16	IF <1 YEAR, ENTER 0. YEARS	YES..1 NO...2	YES..1 NO...2 >>9	ADULT EDU..1 KORANIC.....2 MMEMKWA....3 PRE-SCHOOL.4 PRIMARY....5 SECONDARY (1-4)......6 SECONDARY (5-6)......7 UNIVERSITY.8 LEVEL / YEARS COMPLETED IN LEVEL	YES..1 NO...2 >>10 / YEARS COMPLETED IN LEVEL	YES..1 NO...2 >>14
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									

	11.	12.	13.	14.	15.	16.	17.	18.	19.
I D C O D E	What is [NAME]'s marital status? READ ALL RESPONSES	Does [NAME]'s spouse currently live in this household?	COPY THE ID CODE OF THE WIFE/ HUSBAND. IF MORE THAN ONE WIFE, COPY ID CODES OF ALL WIVES RESIDENT IN HOUSEHOLD	For how long was [NAME] absent during the past 12 months? MODULES 1A-5 >> NEXT	FOR DIARY HOUSEHOLDS ONLY				
					Is [NAME] present at home today or will he/she be at home at least for 2 days out of the next 14 days?	Is [NAME] 18 years or above, or married, or head of household?	WILL [NAME] FILL IN A DIARY? FOR HOUSEHOLD DIARY: CHOOSE 'YES' FOR BEST INFORMED RESPONDENT PRESENT, NO FOR OTHERS AND ALWAYS SKIP TO NEXT PERSON FOR PERSONAL DIARY: CHOOSE 'YES' FOR EVERYONE WITH 'YES' IN Q16 AND FOLLOW SKIPS BELOW	Who knows most about [NAME]'s everyday activities? COPY ID FROM HOUSEHOLD ROSTER	WHICH DIARY RECORDS [NAME]'S TRANSACTIONS? WRITE DIARY NUMBER
	MONOGAMOUS MARRIED OR NON-FORMAL UNION.....1 POLYGAMOUS MARRIED OR NON-FORMAL UNION.....2 SEPARATED..3>>14 DIVORCED...4>>14 WIDOW/ WIDOWER...5>>14 NEVER MARRIED...6>>14	YES..1 NO...2 >>14	ID CODE / SPOUSE / SECOND WIFE / THIRD WIFE / FOURTH WIFE	PRESENT ALL YEAR..1 ABSENT 6 MONTHS OR LESS.........2 ABSENT MORE THAN 6 MONTHS..........3	YES..1 NO...2 >>17	YES..1 NO...2	YES....1>>19 NO.....2	ID	
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									

Module 4

4

SECTION 2: HOUSEHOLD AMENITIES & ASSETS

1. What material is the floor of this house made of?	2. What material is the roof of this house made of?	3. What material are the walls of this house made of?	4. What type of house is it?	5. How many rooms are used by this household?	6. What is the main source of drinking water?	7. What is the type of toilet used by the household?	8. What is the main fuel used for cooking?	9. What is the main fuel used for lighting?
MUD/EARTH. . . .1 WOOD/PLANK . . .2 TILES. . . . . .3 CEMENT/CONCRETE.4 GRASS. . . . . .5 OTHER (specify).6	MUD. . . . . . .1 THATCH. . . . . .2 WOOD . . . . . .3 IRON SHEETS. . .4 CEMENT/CONCRETE.5 ROOFING TILES. .6 ASBESTOS . . . .7 OTHER (Specify).8	MUD/MUD BRICKS .1 STONE . . . . .2 BURNT BRICKS . .3 CEMENT/CONCRETE.4 WOOD/BAMBOO. . .5 IRON SHEETS. . .6 CARDBOARD. . . .7 OTHER (Specify).8	ROOM or ROOMS. .1 SELF-CONTAINED FLAT/ROW HOUSES 2 WHOLE HOUSE. . .3 SEVERAL BUILDINGS IN THE SAME COMPOUND. . . . 4 OTHER (Specify).5	EXCLUDING BATHROOM, KITCHEN, TOILET AND STORE	PIPE BOURNE WATER TREATED. . . . .1 PIPE BOURNE WATER UNTREATED. . . .2 BORE HOLE/ HAND PUMP. . . .3 COVERED WELL. . . .4 UNCOVERED WELL. . .5 PROTECTED SPRING. .6 UNPROTECTED SPRING.7 RAIN WATER. . . . .8 RIVER, LAKE, POND .9 VENDOR, TRUCK . . 10 OTHER (Specify)...11	NONE (BUSH). . .1 FLUSH TO SEWER .2 FLUS TO SEPTIC TANK. . . . .3 PAN/BUCKET . . .4 COVERED PIT LATRINE . . .5 UNCOVERED PIT LATRINE . . .6 VENTILATED PIT LATRINE . . .7 OTHER (Specify).8	FIREWOOD.... . .1 CHARCOAL. .....2 KEROSENE/OIL....3 GAS . . . .4 ELECTRICITY ....5 CROP RESIDUALS/ SAWDUST . ....6 ANIMAL WASTE....7 OTHER (Specify)..8	KEROSENE/ PARAFFIN. ...1 GAS . . . . . .2 MAIN ELECTRICITY ..3 SOLAR PANELS/PRIVATE GENERATOR . .4 BATTERY . . . . .5 CANDLES . . . . .6 FIREWOOD. . . . .7 OTHER (Specify).8

10. How is the refuse from the household disposed of?	11. How many […] does the household own?	12. Do you or any other member of the household own any among the following?
COLLECTED BY THE GOVERNMENT. . . .1 COLLECTED PRIVATE . . . .2 GOVERNMENT BIN . . . . . .3 DISPOSAL WITHIN COMPOUND. . . .4 NONE/UNAUTHORIZED HEAP. . . . . .5 OTHER (Specify)..6	RECORD 0 if NONE OWNED RECORD 99 IF THE PERSON OWNS MORE THAN 99 ANIMALS	INCLUDE FUNCTIONING EQUIPMENT ONLY YES..1 NO...2

	a. Cattle or other large livestock	[__ __]	a. Smoothing iron		i. Bicycle	
	b. Sheep	[__ __]	b. Refrigerator		j. Motorcycle	
	c. Goats	[__ __]	c. Television		k. Car or truck	
	d. Chickens	[__ __]	d. Mattress/bed		l. Wheelbarrow	
	e. Pigs	[__ __]	e. Radio		m. Landline telephone	
	f. Ducks, Turkeys, and other poultry	[__ __]	f. Watch or clock		n. Mobile telephone	
	e. Rabbits	[__ __]	g. Sewing machine			
	f. Other: specify _____	[__ __]	h. Improved stove			

SECTION 3: LAND

1. Do you or anyone in this household own, rent or use for free a shamba or garden?

YES...1
NO....2>>NEXT SECTION

Plot No.	2 Please describe to me all of the shambas/gardens owned, rented or borrowed by the members of your household and those rented or used free by people who are not member of your household. PLOTS CAN BE TITLED, UNTITLED, RENTED OR USED FREE. SOME PLOTS MAY BE CURRENTLY LEFT FALLOW, SHOULD ALSO BE INCLUDED. LIST ALL PLOTS STARTING WITH THOSE OWNED BY THE HOUSEHOLD,FOLLOWED BY THOSE USED BUT NOT OWNED BY THE HOUSEHOLD. Description	3 What is the primary crop grown on this plot during the last agricultural season? MAIZE. . . . . 1 SOYABEAN. . . .14 COFFEE. . . . . 2 PIGEONPEA . . .15 BANANA. . . . . 3 TOBACCO. . . ..16 CASHEW NUT. . . 4 COTTON. . . . .17 CASSAVA . . . . 5 SUGAR CANE. . .18 SWEET POTATO. . 6 CABBAGE . . . .19 IRISH POTATO. . 7 OKRA. . . . . .20 GROUNDNUT . . . 8 TOMATO. . . . .21 RICE. . . . . . 9 ONION . . . .22 MILLET. . . . .10 PEAS. . . . . .23 SORGHUM . . . .11 FALLOW. . . . .24 WHEAT. . . . . 12 OTHER (SPEC.) .25 BEAN. 13	4 What is the total area of this plot? RECORD AREA TO ONE DECIMAL PLACE AREA UNIT		5 Is this plot owned by the household or any household member? YES, AND USED BY HOUSEHOLD.......1 YES, AND USED BY OTHERS FOR FREE.2 YES AND RENTED OUT.............3 NO, AND USED FOR FREE...........4 >>7 NO, AND RENTED IN.5	6 Does this plot have a title deed? YES..1 NO...2	7 Is this plot co-owned with any other households? YES..1 NO...2
			ACRE. 1	HA....2		
1			[__ __].[__]			
2			[__ __].[__]			
3			[__ __].[__]			
4			[__ __].[__]			
5			[__ __].[__]			
6			[__ __].[__]			
7			[__ __].[__]			
8			[__ __].[__]			
9			[__ __].[__]			
10			[__ __].[__]			
11			[__ __].[__]			
12			[__ __].[__]			

Module 4

6

Starting time for this section: [__|__]:[__|__] [__|__]

| 1. According to the Roster, what is the number of household members **10 years old or older?** | [___] |

Review the Roster section where all household members are listed. In the order in which they are listed in the Roster, write the name and ID code of all members of the household who are **10 years old or older** in Columns 2 and 3 of Table 1.

Table 1: Self-Reported Respondents

(1) Person	(2) ID Code	(3) Name of Respondents 10 years old or older	(4) Mark Selected Respondents with an "X"
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

(Insert Table 2 here)

Count the number of eligible respondents you have listed in Table 1 above. Using Table 2, go to the row that corresponds to the number of eligible respondents in the household and follow it across to find the number of the persons (NOT THEIR ID CODE, INSTEAD THE NUMBER)

Each of the persons who are selected in Table 1 will serve as a separate respondent for the labor module. Fill in their ID codes and names on the first page of the labor module and proceed with the interview.

Question	Response Codes	HH Member	HH Member
COPY ID OF THE RANDOMLY SELECTED HOUSEHOLD MEMBER FROM THE ROSTER.		[__ __]	[__ __]
1.COPY THE NAME OF THE HOUSEHOLD MEMBER FROM THE ROSTER.			
2. HOW MANY VISITS DID YOU MAKE TO INTERVIEW [.....]? IF 1 VISIT ONLY >> 4		[__]	[__]
3. WHY DID YOU MAKE MULTIPLE VISITS TO INTERVIEW [....]? S/HE WAS....	OCCUPIED WITH OTHER ACTIVITES . . . . . 1 AWAY IN ANOTHER VILLAGE. . . . . . .2 HOSPITALIZED. . . . 3 AWAY IN THE FIELDS. 4 AWAY AT MARKET. . 5 AWAY AT SCHOOL. . . 6 OTHER, SPECIFY. . . 7 _____	[__]	[__]
4. IS THE PERSON RESPONDING FOR HIMSELF/ HERSELF?	YES...1 (»7) NO....2	[__]	[__]
5. WHO IS RESPONDING FOR PERSON [...]? COPY ID OF PROXY RESPONDENT FROM THE ROSTER.		[__ __]	[__ __]
6. What is your relationship to the respondent? S/he is my …	WIFE/HUSBAND. . . . . .1 CHILD/ADOPTED CHILD . .2 GRANDCHILD. . . . . . .3 NIECE/NEPHEW. . . . . .4 FATHER/MOTHER . . . . .5 SISTER/BROTHER. . . . .6 SON/DAUGHTER-IN-LAW . .7 BROTHER/SISTER-IN-LAW .8 GRANDFATHER/MOTHER . . 9 FATHER/MOTHER-IN-LAW. 10 OTHER RELATIVE. . . . 11 SERVANT OR SERVANT'S RELATIVE . . . . . . 12 LODGER/LODGER'S RELATIVE . . . . . . 13 NON-RELATIVE. . . . . 14 OTHER (SPECIFY) . . . 15 _____	[__ __]	[__ __]
Interviewer tells respondent: "Now I'd like to ask you some questions about the work that you do including your occupation, the types of jobs you have, the time you spend doing work, and the renumeration you receive for this work."			
7. During the past 7 days, have you worked for someone who is not a member of your household, for example, an enterprise, company, the government or any other individual?	YES...1 (»9) NO....2	[__]	[__]
8. During the past 12 months, have you worked for someone who is not a member of your household, for example, an enterprise, company, the government or any other individual?	YES...1 NO....2	[__]	[__]
9. At any time during the last 7 days have you worked on a farm owned, borrowed or rented by a member of your household, whether in cultivating crops or in other farm maintenance tasks, or have you cared for livestock belonging to a member of your household?	YES...1 (»11) NO....2	[__]	[__]

Question	Response Codes	HH Member	HH Member
COPY ID OF THE RANDOMLY SELECTED HOUSEHOLD MEMBER FROM THE ROSTER.		[__ __]	[__ __]
10. At any time during the last 12 months have you cultivated land owned or rented by a member of your household, whether in cultivating crops or in other farm maintenance tasks, or have you cared for livestock belonging to a member of your household?	YES...1 NO....2	[__]	[__]
11. During the past 7 days, have you worked *on your own account or in a business enterprise* belonging to you or someone in your household, for example, as a trader, shop-keeper, barber, dressmaker, carpenter or taxi driver?	YES...1 (»13) NO....2	[__]	[__]
12. At any time during the last 12 months, have you worked on your own account or in a business enterprise belonging to you or someone in your household, for example, as a trader, shop-keeper, barber, dressmaker, carpenter or taxi driver?	YES...1 NO....2	[__]	[__]
13. CHECK THE ANSWERS TO QUESTIONS 7, 9 AND 11. (WORKED IN LAST 7 DAYS)	ANY YES..1 ALL NO...2 (»43)	[__]	[__]
14. What is your primary occupation in your main job? (MAIN OCCUPATION IN THE LAST 7 DAYS)	a. OCCUPATION	[_____]	[_____]
	b. OCCUPATION CODE (TO BE FILLED IN BY SUPERVISOR)	[__ __ __]	[__ __ __]
15. In what sector is this main activity? READ ALL RESPONSES	AGRICULTURE . . . . . 1 MINING/QUARRYING . . .2 MANUFACTURING/ PROCESSING . . . . . .3 GAS/WATER/ ELECTRICITY . . . . . 4 CONSTRUCTION . . . . .5 TRANSPORT . . . . . . 6 BUYING AND SELLING . 7 PERSONAL SERVICES . . 8 EDUCATION/HEALTH . . .9 PUBLIC ADMINISTRATION . . . . .10 DOMESTIC DUTIES . . .11 OTHER, SPECIFY . . . 12 _____	[__ __]	[__ __]
16. For how many hours did you work in the last 7 days in your main job? IF NOT WORKED ENTER 0	HOURS	[__ __]	[__ __]

Question	Response Codes	HH Member	HH Member
COPY ID OF THE RANDOMLY SELECTED HOUSEHOLD MEMBER FROM THE ROSTER.		[__ __]	[__ __]

17. What is your employment status in your main job?
 	
READ ALL RESPONSES
	PAID EMPLOYEE 1
	SELF-EMPLOYED
	     WITH EMPLOYEES .2
	(>>23)
	SELF-EMPLOYED,
	     NO EMPLOYEES . .3
	(>>23)
	UNPAID FAMILY WORKER ..4
	(>>23)
	DOMESTIC EMPLOYEE. . . 5
	OTHER, SPECIFY. 6
	_____
		[__]	[__]

18. Who is your employer in your main job? READ ALL RESPONSES	GOVERNMENT ... . . .1 NGO. . . . . . . 2 COOPERATIVE . . . .3 INTERNATIONAL ORGANIZATION. . . . 4 PRIVATE SECTOR. . .5 HOUSEHOLD . . . . .6 OTHER, SPECIFY .. . 8 _____	[__]	[__]
19. Did you receive wages, salary, cash payments or other in kind payments from this employer for this work?	YES...1 NO....2 (»23)	[__]	[__]
20. How much was your last payment? IF NONE ENTER 0	a. AMOUNT (in TSH)	[_ _ _ _ _ _] TSH	[_ _ _ _ _ _] TSH
	b. TIME UNIT HOUR . . . . 1 DAY . . . . .2 WEEK . . . . 3 MONTH . . . . . . .4 YEAR 5	[__]	[__]
21. Did you receive any in-kind payment or regular allowance for the work you performed for this employer? IF NONE ENTER 0	a.IN KIND ITEM ALLOWANCE. . . . . 1 HOUSING . . . . . .2 TRANSPORT. . . . .3 PRODUCE. . . . . . 4 ANIMALS . . . . . .5 MEALS. . . . . . . 6 CLOTHING . . . . . 7 MEDICATION. . . . .8 OTHER, DURABLE GOOD SPECIFY_____9 OTHER, NON-DURABLE GOOD SPECIFY _____10	[__]	[__]
	b. VALUE (ESTIMATE AMOUNT IN TSH)	[_ _ _ _ _ _] TSH	[_ _ _ _ _ _] TSH
	c. TIME UNIT HOUR . . . . 1 DAY . . . . .2 WEEK . . . . 3 MONTH . . . . . . .4 YEAR 5	[__]	[__]

Question	Response Codes	HH Member	HH Member
COPY ID OF THE RANDOMLY SELECTED HOUSEHOLD MEMBER FROM THE ROSTER.		[__ __]	[__ __]
22. Did you receive any other in-kind payment or regular allowance for the work you performed for this employer? IF NONE ENTER 0	a.IN KIND ITEM ALLOWANCE. . . . . 1 HOUSING . . . . . .2 TRANSPORT. . . . .3 PRODUCE. . . . . . 4 ANIMALS . . . . . .5 MEALS. . . . . . . 6 CLOTHING . . . . . 7 MEDICATION. . . . .8 OTHER, DURABLE GOOD SPECIFY_____9 OTHER, NON-DURABLE GOOD SPECIFY _____10	[__]	[__]
	b. VALUE (ESTIMATE AMOUNT IN TSH)	[_ _ _ _ _ _] TSH	[_ _ _ _ _ _] TSH
	c. TIME UNIT HOUR . . . . 1 DAY . . . . .2 WEEK . . . . 3 MONTH . . . . . . .4 YEAR 5	[__]	[__]
23. Did you have a second job or economic activity in the last seven days? REFER BACK TO Q7, 9 & 11	YES...1 NO....2 (»43)	[__]	[__]
24. What is your primary occupation in your second job?	a. OCCUPATION	[_____]	[_____]
	b. OCCUPATION CODE (TO BE FILLED IN BY SUPERVISOR)	[__ __ __]	[__ __ __]
25. In what sector is this secondary activity? READ ALL RESPONSES	AGRICULTURE . . . . . 1 MINING/QUARRYING . . .2 MANUFACTURING/ PROCESSING . . . . . .3 GAS/WATER/ ELECTRICITY . . . . . 4 CONSTRUCTION . . . . .5 TRANSPORT . . . . . . 6 BUYING AND SELLING . 7 PERSONAL SERVICES . . 8 EDUCATION/HEALTH . . .9 PUBLIC ADMINISTRATION . . . . 10 DOMESTIC DUTIES . . .11 OTHER, SPECIFY . . . 12 _____	[__ __]	[__ __]
26. For how many hours did you work in the last 7 days in your second job? IF NOT WORKED, ENTER 0	HOURS	[__ __]	[__ __]

Question	Response Codes	HH Member	HH Member
COPY ID OF THE RANDOMLY SELECTED HOUSEHOLD MEMBER FROM THE ROSTER.		[__ __]	[__ __]

27. What is your employment status in your second job?
 	
READ ALL RESPONSES
	PAID EMPLOYEE 1
	SELF-EMPLOYED
	    WITH EMPLOYEES .2
	(>>33)
	SELF-EMPLOYED,
	    NO EMPLOYEES . .3
	(>>33)
	UNPAID FAMILY WORKER ..4
	(>>33)
	DOMESTIC EMPLOYEE. . . 5
	OTHER, SPECIFY. 6
	_____
		[__]	[__]

28. Who is your employer in your second job? READ ALL RESPONSES	GOVERNMENT . . . .1 NGO. . . . . 2 COOPERATIVE .. . . .3 INTERNATIONAL ORGANIZATION... . . 4 PRIVATE SECTOR. . .5 HOUSEHOLD . . . . .6 OTHER, SPECIFY . . .8 _____	[__]	[__]
29. Did you receive wages, salary, cash payments or other in kind payments from this employer for this second work?	YES...1 NO....2 (»33)	[__]	[__]
30. How much was your last payment? IF NONE, ENTER 0	a. AMOUNT (in TSH)	[_ _ _ _ _ _] TSH	[_ _ _ _ _ _] TSH
	b. TIME UNIT HOUR . . . . 1 DAY . . . . .2 WEEK . . . . 3 MONTH . . . . . . .4 YEAR 5	[__]	[__]
31. Did you receive any in-kind payment or regular allowance for the work you performed for this employer? IF NONE, ENTER 0	a.IN KIND ITEM ALLOWANCE. . . . . 1 HOUSING . . . . . .2 TRANSPORT. . . . .3 PRODUCE. . . . . . 4 ANIMALS . . . . . .5 MEALS. . . . . . . 6 CLOTHING . . . . . 7 MEDICATION. . . . .8 OTHER, DURABLE GOOD SPECIFY_____9 OTHER, NON-DURABLE GOOD SPECIFY _____10	[__]	[__]
	b. VALUE (ESTIMATE AMOUNT IN TSH)	[_ _ _ _ _ _] TSH	[_ _ _ _ _ _] TSH
	c. TIME UNIT HOUR . . . . 1 DAY . . . . .2 WEEK . . . . 3 MONTH . . . . . . .4 YEAR 5	[__]	[__]

Question	Response Codes	HH Member	HH Member
COPY ID OF THE RANDOMLY SELECTED HOUSEHOLD MEMBER FROM THE ROSTER.		[__ __]	[__ __]
32. Did you receive any other in-kind payment or regular allowance for the work you performed for this employer? IF NONE, ENTER 0	a.IN KIND ITEM ALLOWANCE. . . . . 1 HOUSING . . . . . .2 TRANSPORT. . . . .3 PRODUCE. . . . . . 4 ANIMALS . . . . . .5 MEALS. . . . . . . 6 CLOTHING . . . . . 7 MEDICATION. . . . .8 OTHER, DURABLE GOOD SPECIFY_____9 OTHER, NON-DURABLE GOOD SPECIFY _____10	[__]	[__]
	b. VALUE (ESTIMATE AMOUNT IN TSH)	[_ _ _ _ _ _] TSH	[_ _ _ _ _ _] TSH
	c. TIME UNIT HOUR . . . . 1 DAY . . . . .2 WEEK . . . . 3 MONTH . . . . . . .4 YEAR 5	[__]	[__]
33. Did you have a third job or economic activity in the <u>last seven days</u>? REFER BACK TO Q7,9&11	YES...1 NO....2 (»43)	[__]	[__]
34. What is your primary occupation in your third job?	a. OCCUPATION	[_____]	[_____]
	b. OCCUPATION CODE (TO BE FILLED IN BY SUPERVISOR)	[__ __ __]	[__ __ __]
35. In what sector is this third activity? READ ALL RESPONSES	AGRICULTURE . . . . . 1 MINING/QUARRYING . . .2 MANUFACTURING/ PROCESSING . . . . . .3 GAS/WATER/ ELECTRICITY . . . . . 4 CONSTRUCTION . . . . .5 TRANSPORT . . . . . . 6 BUYING AND SELLING . 7 PERSONAL SERVICES . . 8 EDUCATION/HEALTH . . .9 PUBLIC ADMINISTRATION . . . . .10 DOMESTIC DUTIES . . .11 OTHER, SPECIFY . . . 12 _____	[__ __]	[__ __]
36. For how many hours did you work in the <u>last 7 days</u> in your third job? IF NOT WORKED, ENTER 0	HOURS	[__ __]	[__ __]

Question	Response Codes	HH Member	HH Member
COPY ID OF THE RANDOMLY SELECTED HOUSEHOLD MEMBER FROM THE ROSTER.		[__ __]	[__ __]

37. What is your employment status in your third job?
 	
READ ALL RESPONSES
	PAID EMPLOYEE 1
	SELF-EMPLOYED
	      WITH EMPLOYEES .2
	(>>43)
	SELF-EMPLOYED,
	      NO EMPLOYEES . .3
	(>>43)
	UNPAID FAMILY WORKER ..4
	(>>43)
	DOMESTIC EMPLOYEE. . . 5
	OTHER, SPECIFY. 6
		[__]	[__]

38. Who is your employer in your third job? READ ALL RESPONSES	GOVERNMENT .. . . . . .1 NGO. . . . . 2 COOPERATIVE . . . . . .3 INTERNATIONAL ORGANIZATION.. . . . . 4 PRIVATE SECTOR. . . . .5 HOUSEHOLD . . . . . . .6 OTHER, SPECIFY 8	[__]	[__]
39. Did you receive wages, salary cash payments or other inkind payments from this employer for this work?	YES...1 NO....2 (»43)	[__]	[__]
40. How much was your last payment? IF NONE, ENTER 0	a. AMOUNT (in TSH)	[_ _ _ _ _ _] TSH	[_ _ _ _ _ _] TSH
	b. TIME UNIT HOUR . . . . 1 DAY . . . . .2 WEEK . . . . 3 MONTH . . . . . . .4 YEAR 5	[__]	[__]
41. Did you receive any in-kind payment or regular allowance for the work you performed for this employer? IF NONE, ENTER 0	a.IN KIND ITEM ALLOWANCE. . . . . 1 HOUSING . . . . . .2 TRANSPORT. . . . .3 PRODUCE. . . . . . 4 ANIMALS . . . . . .5 MEALS. . . . . . . 6 CLOTHING . . . . . 7 MEDICATION. . . . .8 OTHER, DURABLE GOOD SPECIFY_____9 OTHER, NON-DURABLE GOOD SPECIFY _____10	[__]	[__]
	b. VALUE (ESTIMATE AMOUNT IN TSH)	[_ _ _ _ _ _] TSH	[_ _ _ _ _ _] TSH
	c. TIME UNIT HOUR . . . . 1 DAY . . . . .2 WEEK . . . . 3 MONTH . . . . . . .4 YEAR 5	[__]	[__]

Question	Response Codes	HH Member	HH Member
COPY ID OF THE RANDOMLY SELECTED HOUSEHOLD MEMBER FROM THE ROSTER.		[__ __]	[__ __]
42. Did you receive any other in-kind payment or regular allowance for the work you performed for this employer? IF NONE, ENTER 0	a.IN KIND ITEM ALLOWANCE. . . . . 1 HOUSING . . . . . .2 TRANSPORT. . . . .3 PRODUCE. . . . . . 4 ANIMALS . . . . . .5 MEALS. . . . . . 6 CLOTHING . . . . . 7 MEDICATION. . . . .8 OTHER, DURABLE GOOD SPECIFY_____9 OTHER, NON-DURABLE GOOD SPECIFY _____10	[__]	[__]
	b. VALUE (ESTIMATE AMOUNT IN TSH)	[_ _ _ _ _ _] TSH	[_ _ _ _ _ _] TSH
	c. TIME UNIT HOUR . . . . 1 DAY . . . . .2 WEEK . . . . 3 MONTH . . . . . . .4 YEAR 5	[__]	[__]

43. Now I would like to ask about your activities that you do for the household. How much time in the last 24 hours did you spend on any of the following activities for the household?

IF NOT WORKED, ENTER 0

		HH Member	HH Member
a. COLLECTING FIREWOOD?	HOURS	[__ __]	[__ __]
	MINUTES	[__ __]	[__ __]
b. FETCHING WATER?	HOURS	[__ __]	[__ __]
	MINUTES	[__ __]	[__ __]

44. Do you usually do any of the following activities?

		HH Member	HH Member
a. WASHING CLOTHES?	YES...1 NO....2	[__]	[__]
b. COOKING?	YES...1 NO....2	[__]	[__]
c. TAKING CARE OF SICK/ELDERLY?	YES...1 NO....2	[__]	[__]
45. PLEASE LIST THE ID CODES FOR OTHER HOUSEHOLD MEMBERS WHO WERE IN THE ROOM OR PRESENT FOR THE INTERVIEW (EVEN A PORTION OF IT). ENTER 'XX' IF NO ONE WAS THERE IF NON-HOUSEHOLD MEMBER ENTER 99	a.HH MEMBER 1	[__ __]	[__ __]
	b. HH MEMBER 2	[__ __]	[__ __]
	c.HH MEMBER 3	[__ __]	[__ __]
	d.HH MEMBER 4	[__ __]	[__ __]
	e. HH MEMBER 5	[__ __]	[__ __]

RESPONDENT NO. [ ]

SECTION 5.4: Food Consumption and Frequent non-Food Consumption

1. Within the past 7 days, did the members of this household eat/drink any [. . .] within the household? ONLY LIST ITEMS CONSUMED WITHIN THE HOUSEHOLD AND EXCLUDE FOOD CONSUMED OUTSIDE THE HOUSEHOLD ASK FOR ITEMS BEFORE MOVING TO Q2 YES..1 NO...2 >>NEXT	2. Within the past 7 days did anyone in this hh purchase any […]? YES..1 NO...2	3. Within the past 7 days did anyone in this hh consume any […] from a stock you keep? YES..1 NO...2	4. Within the past 7 days did anyone in this hh consume any […] from your own harvest? YES..1 NO...2	5. Within the past 7 days did anyone in this hh consume any […] from gifts/assistance you received or any other sources? EXCLUDE FOOD TAKEN OUTSIDE THE HOUSEHOLD YES..1 NO...2	6. REVIEW QUESTIONS 2-6. IS AT LEAST ONE ANSWER 'YES'? YES..1 NO...2	7. How much would it have cost your household to purchase the same amount? TZS
01 Cereals and Cereal products						
02 Tubers and Plantains						
03 Sugar and Sweets						
04 Pulses, Dry						
05 Nuts and Seeds						
06 Vegetables						
07 Fruits						
08 Meat, meat products, fish						
09 Milk and milk products (*excl*. fats)						
10 Oil, fats, spices						
11 Beverages						

SECTION 5: Food Consumption and Frequent non-Food Consumption

BEFORE ASKING Q9 NOTE THE RECALL PERIOD (7 OR 14 DAYS) IN SPACE PROVIDED

9.
In the past _____ days did any people that you did not list as household members [READ LIST FROM HH ROSTER] eat any meals in your household?   YES..1>>10   NO...2>>12   [ ]

		10. What was the total number of days in which any meal was shared with people […]? IF NONE, ENTER 0	11. What was the total number of meals that were shared over past 7 days with […]? IF NONE, ENTER 0
01	Children 0-5 years		
02	Children 6-15 years		
03	Adults 16-65 years		
04	People over 66 years old		

OUTSIDE FOOD/DRINK

12. Within the past 7 days, did the members of this household [READ LIST OF MEMBERS FROM ROSTER] take any [. ..] **outside** this household? YES..1 NO...2 >>NEXT		13. What was the value of [...] eaten/drunk **outside** this household in the last 7 days? INCLUDE GIFTS AS WELL AS PURCHASES TZS
CODE	ITEM	
1201	Full meals (breakfast, lunch, dinner)	
1202	Barbecued meat, chips, roast bananas, and other snacks	
1203	Kibuku and other local brews	
1204	Wine, commercial beers, and spirits	
1205	Sodas and other non-acoholic drinks	
1206	Sweets and ice-cream	
1207	snacks	

FREQUENT NON-FOOD EXPENDITURES

14. Over the past 2 **weeks** did anyone in the household purchase any [...]? YES..1 NO...2 >>NEXT		15. How much did your household pay in total for [.. ITEM..] bought in past 2 weeks? TZS
CODE	ITEM	
2001	Charcoal/coal	
2002	Firewood	
2003	Kerosene, paraffin	
2004	Matches, lighters, candles, lamp/stove wicks	
2005	Laundry soap, toilet soap	
2006	Cigarettes, tobacco, snuff	
2007	Cellphone top-up cards and internet	
2008	Transport Petrol, oil, fares for transport (bus, mini-bus, taxi, boat). Include transport to/from school or for medical care	

SECTION 6: NON-FOOD EXPENDITURES

1. Over the past **1 month**, did anyone in the household purchase any [..ITEM..]?		YES..1 NO...2 >>NEXT	2. How much did your household pay in total for [...] bought in past 1 month? TZS
CODE	ITEM		
2009	Personal care — Toilet paper, toothpaste, hair products, razor, perfumes, lotions, make-up, beauty salons (exclude toilet/laundry soap)		
2010	Batteries		
2011	Utilities — Electricity, water, garbage disposal, telephone landline		

3. Over the past **12 months**, did anyone in the household purchase any [..ITEM..]?		YES..1 NO...2 >>NEXT	4. How much did your household pay in total for [...] bought in past 12 months? TZS
CODE	ITEM		
2012	Furniture — Beds, chairs, tables, sofas, mirrors, carpets		
2013	Linen, bed/mattress, cloths — Sheets, blankets, pillows, towels, mosquito nets, curtains		
2014	Household durables, appliances — Stoves (anytype), cookers, refrigerator, fan, air conditioner, heater, radio, phones, cellphones		
2015	Kitchenware — Pots, pans, bowls, dishes, utensils, knives		
2016	Other household wares — Torches, bulbs, lanterns, baskets, brooms, brushes		
2017	Repairs for assets and durables — Repairs to house, car, motorbike, bicycle, ratio, TV, etc.		
2018	Clothing and footwear for men and boys over 15 years — Khanzus, hats, trousers, shirts, coats, undergarments, socks, shoes, tailoring		
2019	Clothing and footwear for women and girls over 15 years — Khanga, kitenge, sarees, dresses, skirts, trousers, blouses, coats, undergarments, socks, shoes, tailoring		
2020	Clothing for children under 15 years — Trousers, dresses, skirts, shirts, blouses, socks, shoes, tailoring		
2021	Other personal effects — Yarn and sewing material, umbrellas, gloves, handbags, purses, wallets, sunglasses, jewellery		
2022	Modern medical care services — Hospitals, dispensaries, private doctors, densitry. (Excluding transport/food)		
2023	Modern medical care: medications — Prescribed medicine, non-prescribed medicine		
2024	Traditional medical care — Traditional healers, traditional medicine		
2025	Education — School fees, uniform, equipment. (Excluding transport/food)		
2026	Entertainment and recreation — Books (not school books), magazines, newspapers, cassettes, cinema, sports equipment, stamps/postal		
2027	Cleaning materials, household services — Detergents (not laundry soap), insecticides, sprays and coils, polish		
2028	Contributions to religious and other organizations		
2029	Ceremonies — Contributions to wedding parties and funerals, dowries paid out		
2030	Taxes — Revenue tax, development levy or village tax, vehicle tax. Exclude taxes related to household enterprises.		
2031	Insurance — Car, medical, life insurance		
2032	Domestic services — Payments given to domesitc workers		

5. REFER BACK TO ALL PREVIOUS NON-FOOD QUESTIONS AND THE HOUSEHOLD ROSTER IN SECTION 1

Are expenditures for anyone listed on the household roster missing?

YES...1   [   ]
NO...2
>> FINISHING TIME

6. Whose information is missing and how much is not captured in what you mentioned to me?

```
SHARE CODES:
ALL................1     LESS THAN HALF.......4
MOST..............2     JUST A SMALL AMOUNT..5
SOME..............3
```

ID				
SHARE				

Finishing time for this Section: [__|__]:[__|__] [__|__]